

Saint Joseph Academy



Ad Astra Per Aspera

101 Saint Joseph Drive
Brownsville, Texas 78520-7308

(956) 542-3581
Fax (956) 698-7097

Pre-Authorized Credit Card Charge

- ☐ Tuition only
☐ Tuition and other non-tuition fees (activity, sports, etc.)
☐ Other _____

Amount: \$ _____ (leave blank if for tuition)

Frequency: ☐ Monthly ☐ One time only

(Charges made on the 10th unless otherwise indicated)

Name on Card: _____

Address: _____

City, State, Zip: _____

Card Type: ☐ Visa  ☐ Mastercard 

Card # _____

Expiration Date: _____

I, _____ (print full name), agree to have Saint Joseph Academy charge my credit card as indicated above.

Signature _____

Date _____

Student(s) Name(s) Grade(s)

Student(s) Name(s) Grade(s)

Telephone (Home) () _____ (Work) () _____

(Cell) () _____