

Cushing Academy Terms and Conditions for Penguin Points ID Card

Cushing Academy Admissions Office
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By signing you agree to the terms and conditions of the Penguin Points and Photo ID Card.

Student's Name: _____
FIRST MIDDLE LAST

Student's Signature: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

Cushing Academy Penguin Points Purchase Form

Student's Name: _____
FIRST MIDDLE LAST

Number of Penguin Points to Purchase _____
(1 POINTS = \$1 USD)

Payment Type

Cash

Check

Credit Card# (New Students Only): _____

CREDIT CARDS ACCEPTED: MASTERCARD VISA DISCOVER

Exp. Date: _____ Card Verification #: _____
MONTH/ YEAR THE THREE DIGIT NUMBER FOUND IN THE SIGNATURE AREA ON THE
BACK OF THE CREDIT CARD (AFTER YOUR CREDIT CARD NUMBER).

Cardholder name: _____
FIRST MIDDLE LAST

Billing address: _____
STREET

CITY STATE ZIP CODE COUNTRY

Signature: _____ Date: _____