

CHARLOTTE EXTREME ALLSTARS

Charlotte Extreme Credit Request

Cheerleader: _____

Team: _____

Amount \$ _____

Credit Account:

(Candle fundraiser, overpayment, etc)

Apply Payment to:

Comments:

(Office use only)

Charlotte Extreme Credit Receipt

Cheerleader: _____

Team: _____

Amount \$ _____

Amount Applied to:

Credit Balance:

Comments: