

## **Recurring Payment Authorization Form**

Schedule your payment to be automatically charged to your Visa or Master Card. Just complete and sign this form to get started!

## Recurring Payments Will Make Your Life Easier:

- It's convenient (saving you time and postage)
- Your payment is always on time (even if you're out of town), eliminating late charges

## Here's How Recurring Payments Work:

You authorize regularly weekly/biweekly or monthly scheduled charges to your credit card. You will be charged the amount indicated below each billing period. A receipt for each payment will be emailed to you and the charge will appear on your bank statement as an "ACH Debit." You agree that no prior notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

## Please complete the information below:

(full name)	_ authorize <b>PROLETICS, LLC</b> to c	
ndicated below for \$	_ on DAY OF	, 2023 and
weekly/biweekly or monthly for pay	ment of my Summer Camp/Aftersch	nool/Evening Class tuition for
Billing Address	Phone#	<u> </u>
City, State, Zip	Emai	I
	Credit Card	
Visa 🗌 Mas	sterCard	
Cardholder	I understand that this author	ization will remain in effect until I cancel
Name		ee to notify <b>PROLETICS, LLC</b> in writing of account information or termination of this
Card Number	authorization at least 15 da above noted payment dat understand that the paym	ays prior to the next billing date. If the tes fall on a weekend or holiday, I tents may be executed on the next
Exp. Date	understand that because th	bits to my checking/savings account, I nese are electronic transactions, these
3 Digit Sec Code	noted periodic transaction da	om my account as soon as the above ates. In the case of an ACH Transaction
	being rejected for Non Suff	icient Funds (NSF) I understand, that at its discretion attempt to process the
Signature:	charge again within 7 days charge for each attempt ret separate transaction from	s, and agree to an additional <b>\$25.00</b> urned NSF which will be initiated as a the authorized recurring payment. I
Data	must comply with the provis	ation of ACH transactions to my account sions of U.S. law. I certify that I am an
Date:	these scheduled transaction	t card/bank account and will not dispute is with my bank or credit card company; correspond to the terms indicated in this
	form.	