



Recurring Payment Authorization Form

Payments will be automatically charged to your credit card on the 5th of each month.

How Recurring Payments Work:

You authorize regularly scheduled charges to your credit card. You will be charged the amount indicated below each billing period. A receipt can be requested and can be emailed or you can stop by the front desk to receive a copy for each payment.

Please complete the information below:

I [redacted] authorize Carl Gipson Center to charge my credit card indicated below for [redacted] on the 5th of each month for payment of my membership.

Billing Address [redacted] **Apt/ Unit #** [redacted]

City, State, Zip [redacted]

Phone # [redacted] **Email** [redacted]

Credit Card Information	
Cardholder Name	[redacted]
Card Number	[redacted]
Exp. Date [redacted] / [redacted]	CCV Code [redacted]
<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard

- I understand that if I fail to pay my monthly membership fee, the CGC holds the right to terminate my membership after 30 days of non-payment and send any unpaid balance to collections and that my membership will remain inactive until I am able to bring it current. Future registration will depend upon proper settlement of all old accounts.
- The Credit Card Draft is a part of a continuous membership plan. I understand that my membership will remain in effect permanently or until I initiate its termination.
- By providing my credit card information, I authorize the CGC to charge my credit card for the amount owed by me by initializing debit entries to the accounts provided and authorize my credit card company to accept and debt entries initiated by the CGC without the responsibility for correctness. It is understood that the sending of preauthorized withdrawals to my credit card company as a payment becomes dues shall constitute valid notice of such payment due.
- Should a charge not be honored for any reason I understand that I will be responsible for payment for that month plus a \$10 administrative fee for credit card drafts.
- I authorize the CGC to extend my credit card expiration date on file by two years upon completion of its current expiration date.
- The CGC may, at its discretion, adjust the monthly rate it charges for my (our) membership. I understand that I will receive at least 30 days notice prior to such a change.

Signature [redacted]

Date [redacted]