

CFC FITNESS, LLC.
AUTHORIZATION AGREEMENT FORM FOR ELECTRONIC ACH PAYMENT

I (we), _____ (name) authorize and request **CFC Fitness LLC**, hereinafter called CFC, to initiate electronic debit entries (ACH) to charge my (our) account indicated below in the financial institution named below, hereinafter called BANK. I (we) authorize CFC to start withdrawing beginning on this 1st or 15th day of the month (circle one) on an ongoing MONTHLY basis, in the amount of \$ _____. If you authorize the first payment to come out of your account, the pier diem will be \$.50 from the date of your membership until the start date of the automatic draft (as an example, if there are 10 days until the 1st, it will cost \$5.00). Your residual payments after the initial draft will be for the amount specified above beginning on the 1st or 15th. I (we) authorize and request. I (we) authorize and request bank to honor the debit entries initiated by company and debit these charges to that account. This authorization relates to all payments required on my (our) account identified below and the related contracted. CFC reserves the right to automatically charge a customer's (my and /or our) checking account for any unpaid balances that are deemed past due and/or in collection status. This authorization is to remain in full force and effect until all amounts owed related to the contract are paid in full force and effect until all amounts owed related to the contract are paid in full, or until I (we) cancel this authorization. To cancel, **I (we) must notify CFC in writing and give a 2 week notice to act AND also no money or unpaid balances must be outstanding.** If any unpaid balances are outstanding CFC has full authorization to clear our account by use of this authorization agreement form. I (we) agree that CFC, in its sole discretion may terminate this agreement if my account should lack sufficient funds for payment. In the event CFC is unable to secure funds from my bank account. I (we) will be charged a return check fee and/or insufficient funds fee (\$30) and further collection may be undertaken to the full extent provided by law. Because of the time it takes to set up the ACH, there is a 90-day non-refundable commitment for processing and setup.

Cancellation Policy:

After the first 90 days have elapsed, the member has the right to cancel the ACH. In order to do so, CFC must have in writing, "in writing" - via email (cfcfitness2008@gmail.com) or put in the box on the office door, the member's authorization to cancel the ACH, 2 weeks prior to expiration of the membership.

ACH Checking Account Information – Complete the information below for ACH electronic debit transactions. Note: Please attach a VOIDED Check for the checking account to be debited.

Member Name(s) on checking account: _____

Financial Institution Name: _____

9-Digit ABA Routing Number _____

Checking Account Number _____

Signature: _____	Today's Date _____
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Anyone else whose signature is REQUIRED to withdraw funds from this checking account must sign:

Signature: _____