

Authorization Agreement for Monthly Convenient Express

I hereby authorize the City of Huxley, hereinafter called company, to initiate debit entries to my CHECKING account at the depository financial institution named below, hereinafter called Depository, and to debit the same such account. I also understand that this debit transaction for payment of a Fitness Center Membership will occur on the 20th. of each month. If the 20th. Falls on a Saturday or Sunday the transaction will occur the following business day.

Bank Name: _____

City: _____ State: _____ Zip: _____

Bank Routing Number: _____

Account Number: _____

I hereby authorize the debit of my account to start on ____/____/____. This authorization is to remain In full force and affect until company has received written notification informing me of it's termination in such time and in such manner as to afford company and depository ten business days to act on it.

The company reserves the right to reverse a debit in the event a customer was debited in error.

Customer's name (print): _____

Signed: _____ Dated: _____

ID NO. (ssn): _____

Membership Type: _____ Renewal Date: _____

Current Rate: _____. Prior to rate change notification will be mailed.

MEMBERSHIP #: _____