



Credit Card Authorization Form

Energy Gym provides the convenience of charging your Monthly Tuition on your credit or debit card the 20th of the month during your Enrollment time.

Gymnast Name: _____

Name on Card: _____

Visa/Mastercard/Discover #: _____

Expiration: _____ Security Code: _____

Address on Card: _____

_____ Zip Code: _____

I authorize Energy Gymnastics, Inc. to run my card the 20th of each month for my monthly enrollment. If the 20th falls on a Sunday, a Holiday or when Energy Gym is closed, I understand that my card will be run on the next business day.

Signature: _____ Date: _____

Initial: _____ **If I do not make my monthly payment via an alternate method **before** the 20th of the month via Cash, Check or Charge, Energy Gymnastics, Inc. has my permission to charge my above credit/debit card.

Initial: _____ **I understand that if I do not Terminate my Monthly Enrollment by the 19th of the Month, prior to my credit card being run on the 20th, I am responsible for the following month's of Class(es). I understand that there will be NO pro-rations or Refunds after the 20th when my card has been charged.

Initial: _____ **I understand that if my above credit card does not go through on the 20th of the month, I will be assessed a \$10.00 late fee if not paid within 5 days after notification.