

**Fitness Edge Studio, LLC**  
4210 Highway 9  
Boiling Springs, SC 29316 864.599.6639  
[www.thefitnessedgestudio.com](http://www.thefitnessedgestudio.com)



## Automatic Draft Form

I authorize Fitness Edge Studio to deduct \_\_\_\_\_ each month from my account for my membership on the 1<sup>st</sup> or 15<sup>th</sup> of each month. Please initial in the blank by your date preference. 1<sup>st</sup> \_\_\_\_\_ 15<sup>th</sup> \_\_\_\_\_

Date: \_\_\_\_\_

Name on Account: \_\_\_\_\_

Bank: \_\_\_\_\_

Account Number: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Witness: \_\_\_\_\_

Checking or Savings: \_\_\_\_\_

Names Signing up for Membership: \_\_\_\_\_

**There is a \$30 charge for all return drafts.**

By signing above, I understand that there is a 30 day cancellation and I must come in and sign a cancellation form in order for the cancellation to be effective.

The draft is done on the 1<sup>st</sup> or 15<sup>th</sup> of each month and the first draft will be sent in on the 15<sup>th</sup> of the first month after the date hereof.

**Please attach a voided check to this form to provide correct information to the bank.**

*Please note that your financial institute may not reflect the draft for two (2) or four (4) days after the draft date.*