

Monthly Membership Recurring Payment Authorization Form

You authorize Morgan Ford Massage Therapy, LLC to make regularly scheduled charges to your Credit or Debit card. Your discounted monthly rate will be deducted, either on the 1st or 15th, for any services you wish to receive EACH MONTH. Membership entitles you to an unlimited number of services at the member rates, PLUS 10% off all retail products. Service credits do not expire and roll over to subsequent month(s) if not used. Membership cancellation must be made in writing 7 days prior to the requested cancellation effective date. Membership payments are non-refundable once paid. There are no fees, contract, or minimum term - though Memberships maintained for less than 3 months are not eligible for membership rates again for 1 year. Membership Benefits are non-transferable, and normal appointment cancellation policies apply.

Guest Services Representative to complete this section:

☐ New Membership ☐ Change of Information ☐ Cancellation ☐ Freeze ____ mos.

Guest Name Exactly as is appears in our System: _____

Cardholder Name: _____ (Full name as it appears on card)

Card #: _____ Expiration Date: _____ CVV: _____

Billing Zip code: _____

Billing Cycle 1st / 15th Start Date (Must be on the 1st or 15th of a month) ____ / ____ / ____

Membership Selected Amount

☐ 30 Minute Massage \$54

☐ 60 Minute Massage \$79

☐ 90 Minute Massage \$99

☐ Custom Blend Facial \$79

☐ Other (specify service and price) _____ \$_____

Location _____ Therapist _____ FDS Name _____

Customer to complete below:

Signature _____ Date _____