

Recurring Payment Authorization Form

If you would like to enjoy the convenience of automatic recurring billing, simply complete the Payment Information section below and sign the form. All requested information is required. Upon approval, we will automatically charge your payment method for the amount indicated below. You may cancel this automatic payment authorization at any time by contacting us.

Member Information

Member Name _____

Member Address _____ Phone _____

Email Address _____

Authorization

I authorize **The Village Club & Preserve** to automatically bill the payment method listed below as specified:

Recurring amount _____ Start on 07/01/2020

Payment Information

Bank Account

Accountholder Name _____ Institution _____

Routing Number _____ Account Number _____

Credit Card

Cardholder Name _____ Cardholder ZIP Code _____
(from credit card billing address)

Card number _____ Expires _____ CSV _____

Customer's signature _____

Date _____

I hereby authorize my financial institution to debit my account in the name of THE VILLAGE CLUB & PRESERVE. I understand this debit will appear on my bank or credit statement under the description of The Village Club/Dues. I also realize that this auto debit will appear on my statement between the 1st and the 5th working day of each month. In addition, I understand this auto debit remains in effect until I notify The Village Club & Preserve in writing 30 days prior to cancelling recurring payment. I also give The Village Club & Preserve authority to increase the auto debit with 60 days notice, per VCP policy. Auto debit only cancels/ends with written notice from the account holder.