



Gymstars Recreational ACH Program
435 Washington Street Suite 102
Collierville, TN 38017 901-861-8468

Authorization Agreement – Direct Debits/Credit Card Charges

I hereby authorize Gymstars LLC, hereinafter called Company, to initiate credit (or adjusting debit) entries to my () Checking Account or () Debit/ Credit Card indicated below or my Bank/Credit union named below, hereinafter called Depository, to debit (or adjusting credit) the same to such account.

Depository Name _____ Branch _____

City _____ State _____ Zip _____

Please indicate Automatic Bank Draft (MUST initiate on the 25th of the month) or Credit Card Charge(can be 25th or last day of month) below:

Debit/ Credit Card Number _____
Exp. Date _____ Security Code _____ Zip Code _____

Amount to be drafted: Tuition \$ _____

Please Check Payment Method: 1 Semester _____ Fall or _____ Spring (5 ACH monthly payments)
2 Semesters Fall & Spring (10 ACH monthly payments w/12% disc)
Yearly Plan Fall & Spring + Summer (12 ACH monthly payments w/25% disc)

Begin Date: _____ End Date: _____

*Please indicate the day you want your account drafted ____25th of the month ____30th of the month.

I understand that my account will be drafted on the 25th or 30th of each month for the next month's fees. Example: Feb tuition will be drafted on Jan. 25th or 30th. Gymstars will only draft for the above authorized items. No other fees will be drafted.

Note: *ACH withdrawals will begin with second month tuition coming out on at end of month on 25th or 30th, it can withdraw early if this date is on a weekend or Holiday. First month is paid upon registration along with annual registration fee.

Gymnast name: _____ Account Holder: _____

Billing Address: _____ City _____

State _____ Zip _____ email _____

Signature: _____ date _____