

# Rock Your Body Fitness Auto-Debit Service Form Instructions

For your convenience, Rock Your Body Fitness can automatically debit your credit card or debit account for your Zumba® class payments. To enroll in this service, just follow these easy steps:

1. Read this notice thoroughly, especially the section entitled "Important Information about the Auto-Debit Service."
2. Choose a payment schedule on the authorization form below.
3. Complete and sign the authorization form below.
4. Remove the authorization form and keep the top portion for your records.
6. Return the authorization form to Rock Your Body Fitness.

## IMPORTANT INFORMATION ABOUT THE AUTO-DEBIT SERVICE

You may request that auto-debited payments be posted as of the 1<sup>st</sup> or the 15<sup>th</sup> of each month. This posting does not change the due date of your payments. The due date is always the 1<sup>st</sup> of each month. If you choose the 15<sup>th</sup>, make sure your account is current through the month of the first auto-debit transaction; otherwise, your account will be past due when the payment is debited from your account. If you do not choose a payment schedule below, payments will be debited as of the 1<sup>st</sup> of each month.

When we receive your completed authorization form we will initiate the auto-debit service within 3 days and your auto-debit schedule is active. If your account is delinquent or if a payment will be due before we receive and process your auto-debit authorization, please send a payment with the auto-debit authorization form to ensure your account is current when we initiate your auto-debit schedule.

If at any point in the future, auto-debit is attempted and we are unable to retrieve funds from your account, your auto-debit schedule will be terminated and you will be notified. In this event, you will need to make payments in person. Then, you can request reactivation of the auto-debit service.

The amount that will be debited from your checking account will always be the monthly scheduled payment amount for your account. It is imperative that you notify us immediately if your contact information changes so that you always receive notification regarding your account.

## Credit Card/Debit Card Auto-Debit Service Request and Authorization Form

**Print Name:**

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**Credit Card/Debit Card Number:**

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**EXP Date:** \_\_\_\_\_ **CSC Code:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

I hereby authorize Krystal Coles or Robin Massetti co-owners of Rock Your Body Fitness to automatically debit my account for future monthly payments in the amount of \_\_\_\_\_ . By signing below, I certify that I am authorized to withdraw funds from this account.

Please auto-debit my account on the:  1<sup>st</sup>  15<sup>th</sup>

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

**Signature:**

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**Privacy and Security Statement:** It is the policy of RYBF to respect the privacy of its customers. As such, all information presented here will NOT be sold or distributed to any party. We maintain strict internal policies against unauthorized disclosure or use of customer information. Security protocols have been implemented to restrict access to information according to job responsibility.