Seattle Shotokan Sankukai

Credit Card Recurring Payment Authorization Form

Recurring Payments Will Make Your Life Easier:

- It's convenient (saving you time)
- Your payment is always on time
- You can get Rewards Points for paying your bill

Here's How Recurring Payments Work:

SIGNATURE

You authorize regularly scheduled charges to your Visa, MasterCard, American Express or Discover card. You will be charged each billing period for the total amount due for that period. You agree that no prior-notification will be provided. If you have a question about a charge, just email us at Seattleshotokan@gmail.com and we will get it sorted as fast as possible.

Please complete the information below:	
I authorize Seat	ttle Shotokan Sankukai to charge my credit card
(full name)	
at least 1 day before the end of my payment period, for payment of my karate classes. Questions regarding pay period dates must be made in writing and can be directed to Seattleshotokan@gmail.com	
I understand that I will not receive advanced notice for charges.	
Billing Address	Phone#
City, State, Zip	Email
Account Type: Visa MasterCard	☐ Amex ☐ Discover
Cardholder Name	
Account Number	
Expiration Date	
CVV (3 digit number on back of Visa/MC, 4 digits on front of AMEX)	

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above and in the Membership Policies and FAQs. I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify the business in writing of any changes in my account information or termination of this authorization at least 14 days prior to the next billing date. I certify that I am an authorized user of this credit card and that I will not dispute the scheduled payments with my credit card company provided the transactions correspond to the terms indicated in this authorization form.

DATE