



Monthly Collector

www.monthlycollector.com

Authorization For Direct Payment:

I authorize Monthly Collector, to initiate regular, electronic withdrawals from my Checking Account for payment of services rendered by:

Name of Studio (service provider).

The base amount I authorize to be electronically collected from my account each month is: \$ 100.00. In addition to the base amount, I authorize a maximum variable amount of \$ 50.00 to be withdrawn from my account as determined by the service provider. This variable amount will cover additional books, fees, costs, etc. as determined by the service provider.

I authorize the first of these payments to occur on 9/1/2011 and reoccur at monthly intervals on the 1st 5th 10th 20th (circle one) day of each month thereafter.

These payments will show up on my bank statements as an ACH from Monthly Collector.

(If this day falls on a Saturday during the month, the payment will process on the Friday before. If this day falls on a Sunday or holiday the payment will process on the following business day.)

These authorized payments will continue until I give written notice to Monthly Collector and Monthly Collector has given me written confirmation of my cancellation request. I understand that I must give Monthly Collector a written notice of cancellation at least 7 days before my next scheduled payment. I agree to pay a \$25.00 servicing fee to MonthlyCollector in the event that any of these pending payments is returned due to insufficient funds.

Under penalty of applicable laws, I state that I am 18 years of age or older, and I have legal authority and understanding to enter into this contract. I understand and agree that my personal and financial information is accurate and will be kept strictly confidential by Monthly Collector; my financial information will not be accessible to any third parties. I understand and agree to pay the above said amount each and every month I receive services rendered from the above stated service provider, and that any disputes, disagreements, or undelivered services must be resolved between me and the service provider. I understand that Monthly Collector does not guarantee the services rendered by the service provider and I will not hold Monthly Collector liable for any damages, liabilities, services unperformed, or services underperformed by the said service provider. Because Monthly Collector disburses my funds to the service provider, I understand and agree to resolve all refunds, exchanges, and service disputes with this service provider, not with Monthly Collector. I agree to receive an email from Monthly Collector as my only source of payment confirmation.

By signing, I agree to all the terms and conditions in this contract

Signature: _____ Date: _____

Printed Name _____ Student Name: _____

Email address: (please print very clearly) _____

Phone Number: (____)_____- _____

City, State of Residence _____ 5 digit Zip Code _____

**** Please attach voided check here (no deposit tickets—must be an actual check) ****

Please keep a copy of this contract for your personal records. To contact Monthly Collector for any reason please visit our website at www.monthlycollector.com for our contact information