



This Contract is valid for a 12 month ACH or Credit Card billing membership.

A. ACH Billing Agreement

I, _____ authorize my bank to make monthly payments to Balance Point Health & Fitness, LLC in the amount of \$_____ (incl. tax) by the method below and post it to my account on the 1st or the 15th of every month.

If the date above lands on a weekend or holiday the deduction will be made the next following business day.

Bank Name: _____ Checking Account #: _____

WE REQUIRE A VOIDED CHECK FROM THE ACCOUNT YOU WISH TO HAVE FUNDS TAKEN OUT OF.

I, the buyer, understand that I am in full control of my payment and if at anytime I discontinue my automatic EFT payment, I will do so by advising Balance Point Health & Fitness, LLC in writing a minimum of three(3) days prior to my contract due date and will pay the remainder of my contract in full or will notify Balance Point Health & Fitness, LLC of another form of EFT collection.

B. Credit Card Agreement

I, _____ authorize Balance Point Health & Fitness, LLC to take monthly payments of \$_____ (incl. tax) from my credit card, on the 1st or 15th day of the month, by the information I have given below and post it to my account.

Credit Card #: _____ Exp. Date: _____

I, the buyer, understand that I am in full control of my payment and if at anytime I discontinue my automatic Credit Card payment, I will do so by advising Balance Point Health & Fitness in writing a minimum of three(3) days prior to my contract due date and will pay the remainder of my account in full or I will notify Balance Point Health & Fitness, LLC of another form of Draft collection.

MONTHLY DEDUCTIONS FROM EFT AND CREDIT CARD BILLING WILL INCLUDE YOUR MONTHLY PAYMENT DUE TOWARDS YOUR MEMBERSHIP.

I have read the above and fully understand and agree to this contract.

Member's Signature: _____ Date: _____