



I, _____ authorize my bank or credit card company to make my payment by the method indicated below and post it to my account. I understand that I am in full control of my payment and if at any time I desire to discontinue my automatic payment, I will write the above named company. Change of payment method will not affect other provisions and items of my contract. Whether or not I notify seller, I understand my membership rights and my payment obligations are so set forth by my Membership Agreement. I am fully aware that by signing this agreement and authorizing my bank or credit card company to make my payment, I am committed to a full 365 consecutive day contract with The Sideline and will receive a discounted membership rate by 10%. If early cancellation occurs, I must pay a fee of \$25 for the early termination of this agreement.

- Checking account number _____
(Please provide a voided check)
- Savings account number _____
(Please provide a deposit slip)

Bank Name _____

Bank Address _____

- Credit Card Company: (circle one) VISA Mastercard

Credit card account number: _____

Expiration Date: _____

Signature

Witness

Date

Type of membership & additional names on plan

Office Use Only: Computer updated _____

Initial _____

Place Voided Check Here