



FOR YOUTH DEVELOPMENT®
 FOR HEALTHY LIVING
 FOR SOCIAL RESPONSIBILITY

PAYMENT AUTHORIZATION FORM

For your convenience, we advise that monthly membership and/or program fees be paid via our Easy Pay plan, where fees are automatically deducted from a valid checking account or bank credit/debit card (Visa, MasterCard, or Discover). Please read the following terms and conditions of the Easy Pay plan, initial, and sign below.

Easy Pay Plan Terms

1. ____ **(Initial)** I have read and understand the following terms and conditions regarding the Easy Pay plan. I grant the Oswego YMCA permission to automatically deduct monthly membership and/or program fees from the designated billing method provided below.
2. ____ **(Initial)** I agree to notify the Oswego YMCA **5 days before** any/all scheduled billing dates for membership and/or program fees with any changes that will impact the automatic payment process. Changes include but are not limited to switching bank accounts or credit/debit cards, closing your checking account, a credit/debit card expiring, loss of a credit/debit card, or identity theft.
3. ____ **(Initial)** I understand that if the Oswego YMCA does not receive notification in writing at least **5 days before** any/all scheduled billing dates for membership and/or program fees and fails to collect payment, my account will incur a **\$20 return fee**. I understand that I will receive notice from the Welcome Center if my scheduled payments decline or fail to charge. I understand that all failed payments must be paid in full by the next scheduled billing date to avoid cancellation of membership and/or programs. I agree to update the Welcome Center with current information to avoid this non-negotiable fee.
4. ____ **(Initial)** The Oswego YMCA's Board of Directors may, at their discretion, adjust the monthly rates applicable to membership and programming fees annually. I understand that I will be notified at least 30 days prior to any rate change related to automatically scheduled membership fees.
5. ____ **(Initial) CANCELLATION POLICY:** The Oswego YMCA requires members and program participants to agree to our Cancellation Policy. If you wish to cancel your membership or participation in a program, you must do so in writing at least **5 days before** the scheduled billing date. Cancellations can be requested at the Welcome Center, via email, or through the membership portal. If the Oswego YMCA does not receive notification in writing at least **5 days before** the scheduled billing date, the member or program participant will be held responsible for the upcoming billing cycle before the cancellation takes place.

Authorization Agreement

I hereby authorize the Oswego YMCA to initiate automatic debits from the account indicated below in accordance with the schedule of my monthly membership, program, and any other fees as fixed by the Board of Directors. This authorization will remain in full force and effect until I have notified the Oswego YMCA in writing at least **5 days before** my upcoming scheduled automatic draft date. I have read the terms and conditions of this agreement as described above and agree to abide by it.

Billing Address

City, state

Zip Code

Name of Billing Member (printed)

Signature of Billing Member

Date

Bank Account Type: <input type="checkbox"/> Checking Financial Institution: _____ City, State: _____ Routing/Transit Number: _____ Account Number: _____	Credit/Debit Card Information: (\$2 additional processing fee applies for each reoccurring transaction) <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover Card Number: _____ Expiration Date: _____ Name on Card: _____
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Office Use Only

Membership Type / Program Name	Today's Date	Draft Start Date	Monthly Rate / Program Fees	Staff Initials