## **Bank Transfer Authorization Form**

I authorize In Pursuit Fitness Training to electronically debit my bank account according to the terms outlined below. I acknowledge that electronic debits against my account must comply with United States law.

## Terms of billing:

Starting on \_\_\_\_\_\_ and on the 1st day of each month for \_\_\_\_\_\_ and accordingly thereafter per the terms in invoice(s).

## **Customer bank account information:**

Routing number: \_\_\_\_\_

Account number:

Account type: \_\_\_\_ checking \_\_\_\_ savings

This payment authorization is to remain in effect until I, \_\_\_\_\_\_, notify In Pursuit Fitness Training of its cancellation by giving written notice in enough time for the business and receiving financial institution to have a reasonable opportunity to act on it.

Customer signature

Customer printed name

Date