



The Sports Factory: TSF Academy

Automatic Credit Card Billing Authorization Form

If you would like to enjoy the convenience of automatic billing, simply complete the Credit Card Information section below and sign the form. All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us.

Customer Information

Customer name: _____ Customer account number: N/A Phone: _____

Payment Information (To be completed by merchant)

I authorize TSF Academy to automatically bill the card listed below as specified. If you would like for us to charge the initial deposit and/or the uniform, please check the appropriate box below: In addition to the monthly charges below, please charge this credit card for:

Deposit of \$595 Uniform \$ _____

Amount: \$ _____ Frequency: Weekly Bi-Weekly Semi-Monthly Monthly Quarterly Semi-Annually One Time

Start billing on: _____ End billing when: Contract expires: _____ Customer provides written cancellation

Credit Card Information (To be completed by customer)

The Sports Factory accepts the following credit cards: **Visa, MasterCard, Discover**

Credit card type: _____ Credit card number: _____ Expires: _____

CCV Code: _____ Street Address(where the statement is sent): _____

Cardholder's name: _____ Cardholder's Zip code (required): _____

(as shown on credit card) (from credit card billing address)

Customer's signature: _____ Date: _____