

AUTO WITHDRAWAL AUTHORIZATION FORM

I hereby authorize ChalkBox Gymnastics and Cheer LLC to initiate withdrawals from my account at the financial institution named below, and if deemed necessary, in their sole discretion initiate adjustments for any transactions credit/debited in error.

This authorization is to remain in full force and effective until ChalkBox Gymnastics and Cheer LLC has received written notification from me of its termination. **Written notice of withdrawal from class must be received 30 days prior to the end of the session. Otherwise, the session fee will be withdrawn for holding the child’s space in the class.**

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

Name of Financial Institution _____

Address of Financial Institution (City, State, Zip) _____

Account Holder’s Name _____

Please check one:

Checking

Saving

Bank Routing Number _____

Bank Account Number _____

Account Holder’s Signature _____

ChalkBox Gymnastic has my permission to withdraw the appropriate session fees for services rendered to my child(ren). This includes the annual registration fee and 8 week session fees. Autopay dates for the upcoming session occur on the last Monday of the current session.

Autopay dates for the 2024-25 gymnastics year:

Session #1 – August 19,2024 (this is after Session 1 begins to allow for new enrollments in ACH)

Session #2 – September 30, 2024

Session #3 – November 25, 2024

Session #4 – February 3, 2025

Session #5 – March 30, 2025

Session #6 – May 27, 2025

