

ACH CREDIT/DEBIT AUTHORIZATION FORM

For the purpose of paying **monthly** fees for participation in exercise programs offered by **Fighting to Win, Inc. dba Day One Fitness** (COMPANY), I, (we), _____ hereby authorize the COMPANY to initiate entries to my (our) checking/savings accounts at the financial institution listed below (FINANCIAL INSTITUTION), and, if necessary, initiate adjustments for any transactions credited/debited in error.

In the event a transaction is not honored by the FINANCIAL INSTITUTION, I authorize COMPANY to charge an additional one-time fee per occurrence of \$30 to cover associated fees charged by FINANCIAL INSTITUTION.

TYPE OF BANK ACCOUNT (circle): Checking account Savings account

(Check this box if the checking or savings account is a business or commercial account)

FINANCIAL INSTITUTION NAME _____

FINANCIAL INSTITUTION ADDRESS _____

ACCOUNT NUMBER AT FINANCIAL INSTITUTION _____

FINANCIAL INSTITUTION ROUTING NUMBER _____

AUTHORIZED MONTHLY AMOUNT _____

EFFECTIVE DATE _____ **AND on the** ____ **1st** **OR** ____ **15th** **each month thereafter**

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*Day One Fitness is a 501 c 3, non-profit organization that relies heavily on donations and grants from individuals and businesses within our community. As a participant at Day One Fitness, you may make an optional donation via monthly ACH Transfer. We recommend that you speak with your tax advisor to confirm the eligibility of your donation as a tax deduction. If you wish to make an optional monthly donation, please specify the desired amount below.*

**\*OPTIONAL MONTHLY DONATION AMOUNT** \_\_\_\_\_

*By signing below, I (we) authorize COMPANY to process an ACH Transfer in the amount specified above [AUTHORIZED MONTHLY AMOUNT] plus [OPTIONAL MONTHLY DONATION AMOUNT], or other amounts agreed to in the event of an error, on the*

\_\_\_\_ **1<sup>st</sup>**            **OR**            \_\_\_\_ **15<sup>th</sup>** *(check only one)*

*day of each month, beginning with the effective date listed above [EFFECTIVE DATE].*

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This authority will remain in effect until I have cancelled it in writing and submitted it with a 30 day notice to Fighting to Win, Inc. dba Day One Fitness, 257 Beech Island Avenue, Beech Island, SC 29842.

Signature

/Date

