

**CREDIT CARD CHARGE AUTHORIZATION FORM**

Hahn's Gymnastics, LLC  
18 Legend Dr.  
Arden, NC 28704

Name on Credit Card: \_\_\_\_\_  
Credit Card Type: \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Discover  
Credit Card#: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CCV: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
\_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

The estimated total monthly usage for services/goods that the undersigned customer will be utilizing is \$ \_\_\_\_\_.

The undersigned customer agrees that he/she may choose to pay Hahn's Gymnastics, LLC by check, cash or credit card. However, Hahn's Gymnastics, LLC requires this credit card authorization to be on file with Hahn's Gymnastics, LLC.

The undersigned hereby authorizes Hahn's Gymnastics, LLC to charge said credit card the amount due from the customer to Hahn's Gymnastics, LLC. If any payment to Hahn's Gymnastics, LLC is delayed by more than 3 business days from the invoice due date, whether the result of a failure or refusal to pay such charge a \$10.00 late fee will be applied. In the event of a returned check, a returned check fee of \$25.00 will be applied to the balance due. In addition, a \$15.00 credit card processing fee will be added to the total balance due.

Being the authorized cardholder, the undersigned agrees to the terms set forth in this agreement and specifically authorizes Hahn's Gymnastics, LLC to charge my credit card for the services/goods provided by Hahn's Gymnastics, LLC. I further agree that in the event my credit card becomes invalid, I will immediately provide Hahn's Gymnastics, LLC with a new duly executed Credit Card Charge Authorization Form upon request, to be charged for the payment of any outstanding balance owed Hahn's Gymnastics, LLC. I will not dispute any legitimate charges processed by Hahn's Gymnastics, LLC. This authorization will remain in full until terminated in writing by the undersigned.

Name on Card(Print) \_\_\_\_\_ Date \_\_\_\_\_  
Signature \_\_\_\_\_