



**FOR YOUTH DEVELOPMENT*
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

ELECTRONIC PAYMENT AUTHORIZATION FORM

MEMBERSHIP - PROGRAM - CAMP - CHILD CARE - DONATIONS

ACCOUNT HOLDER

First Name	Last Name	Member Number
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|---|--|--|
| <input type="checkbox"/> Camarillo Family YMCA | <input type="checkbox"/> Montecito Family YMCA | <input type="checkbox"/> Stuart C. Gildred Family YMCA |
| <input type="checkbox"/> Lompoc Family YMCA | <input type="checkbox"/> Santa Barbara Family YMCA | <input type="checkbox"/> Ventura Family YMCA |
| <input type="checkbox"/> Haley Street Youth and Family Center | | |

BANK ACCOUNT OPTION PLEASE CHECK ONE: CHECKING SAVINGS

Routing Number (9 digits)	Account Number
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CREDIT CARD ACCOUNT OPTION PLEASE CHECK ONE: VISA MC AMEX DISCOVER

Account Number	Expiration Date (MM/YYYY)
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Card Issuer / Bank

By signing this form I hereby authorize the Channel Islands YMCA to initiate debits to the bank account/credit card listed above. The YMCA processes recurring payments monthly based on your membership or program join date. If we are unable to debit your account for any reason we may automatically re-attempt to collect the fees. If redrafting is unsuccessful, certain fees may apply and the YMCA reserves the right to terminate any membership/program if a payment cannot be collected.

Please update the YMCA about any credit cards reported lost or stolen, expiration date changes, and address changes. Updates both in person and online must be received 10 days prior to the month of the draft to allow for processing time.

Membership category changes occur automatically on the next draft date following the member's age change. A teen membership will change to an Adult membership at age 19 and an Adult will change to a Senior at age 66. If someone on a Family membership ages out at 24 years, they will automatically be removed from the Family membership. It is up to the member to initiate a family adult-add on charge.

I acknowledge that there is a 30-day notice period before a cancellation is put into effect. Therefore, I must provide a 30-day notice of cancellation prior to your next draft day by signing the appropriate cancellation form in person at the Welcome Center.

I understand it is my responsibility to check my account for YMCA transactions. I will notify the YMCA within 60 days of the transaction date of any transaction that appears to be in error. The transaction will be investigated and corrected if necessary.

I understand that I am agreeing to the terms listed in the cancellation policy of the Channel Islands YMCA.

Account Holder's Signature	Date
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FOR OFFICE USE ONLY

Date	Activity	Entered by
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