F.L.C. Fitness Center Payment Options

Please select one option below and sign the corresponding agreement. This form, the Family Life Center Enrollment Form, the $45 non-refundable application fee, the program fee and services fee, and a voided check (for Option One) must be returned to Family Life Center, Second Baptist Church, 6400 Woodway, Houston, Texas 77057.

☐ OPTION ONE: PAYMENT BY MONTHLY DIRECT DEBIT

I/we hereby authorize the Family Life Center of Second Baptist Church to initiate debit entries to my/our checking account indicated below and my/our financial institution named below to debit the same to such account.

My/our Financial Institution is: _____ Routing # _____ Acct. # _____

This agreement is to remain in full force and effect until the Family Life Center has received written notification from me/us of termination or modification of the agreement in such time and in such manner as to afford Family Life Center and its bank a reasonable opportunity to act on it. I/we wish to pay Family Life Center program and service fees by way of electronic transfer of funds. My/our payment will be electronically transferred on the 15th day of each month. This agreement will be implemented when my/our next payment is due.

Printed Full Name(s) _____ _____

Signature(s) _____ _____

To initiate direct debit, <u>you must attach a check with "void" written on it.</u>

☐ OPTION TWO: ANNUAL PAYMENT BY CHECK

I/we will pay my/our Family Life Center program and service fees annually. I/we will pay for the full year in advance in January of each year. I understand that each payment is non-refundable.

Printed Full Name(s) _____ _____

Signature(s) _____ _____

☐ OPTION THREE: BIANNUAL PAYMENT BY CHECK

I/we will pay my/our Family Life Center program and service fees twice a year. I/we will pay for 6 months in advance both in January and July each year. I understand that each payment is non-refundable.

Printed Full Name(s) _____ _____

Signature(s) _____ _____

<u>CHECK LIST FOR NEW F.L.C. MEMBERS</u>

- ☐ Fill out Family Life Center Enrollment Form.
- ☐ Fill out Family Life Center Payment Options Form.
- ☐ Write a check for $45 non-refundable application fee *and* the program fee and services fee.
- ☐ Include a check with "VOID" written on it (for Option One above).

Revised Dec. 2010