

# Financial Agreement



I understand by checking the boxes and signing below that I am entering into a financial contract with Fury Athletics of Madison. I agree to all financial terms and conditions as outlined in the Program Handbook. I understand that I am subject to these terms and conditions and no refunds will be granted outside of these circumstances.

- For class students, monthly enrollment is assumed unless written notice is given by the 15<sup>th</sup> to withdraw at end of month.
- Payments may be made by cash or check instead of the automatic payment as long as completed by the 20<sup>th</sup> of the prior month. All declined/returned payments are subject to a \$25 service fee.
- All accounts must have a card on file.

**Athlete(s) Name:**

Printed Name: (First, Last)

Date:

Signature:

**Card on file:**

<input type="checkbox"/> Mastercard	Name on Card	Expiration Month/Year	Security Code	Zip Code
<input type="checkbox"/> Visa				
Card Number				

**For Office use only:**

Financial Agreement	Auto Pay	Card on File	Notes:
	YES NO		

• FURY ATHLETICS OF MADISON, LLC •

• 4009 FELLAND ROAD SUITE 112 • MADISON, WI 53718 •

• [WWW.FAMADISON.COM](http://WWW.FAMADISON.COM) • [FURYATHLETICSMADISON@GMAIL.COM](mailto:FURYATHLETICSMADISON@GMAIL.COM) •

# Automatic Payment Authorization



## AUTHORIZATION AGREEMENT FOR AUTOMATIC MONTHLY TUITION PAYMENTS (ACH DEBITS)

I (we) hereby authorize Fury Athletics of Madison to initiate debit entries to my (our) checking account indicated below, hereinafter called DEPOSITORY, to debit the same such account. This authority is to remain in full force and effect until COMPANY and DEPOSITORY has received written notification no later than the 15<sup>th</sup> of the month prior to its termination to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it. The initial amounts shown below may be altered with customer authorization.

Depository (Bank Name)	Routing Number	Your Account Number		
NAME(S) ON ACCOUNT:	NAME #1	NAME #2 (IF NECESSARY)		
DATE SIGNED:	SIGNATURE #1	SIGNATURE #2 (IF NECESSARY)		
ATHLETE #1	MONTHLY TUITION	ADJUSTMENTS	DESCRIPTION	MONTHLY DUE
ATHLETE #2	MONTHLY TUITION	ADJUSTMENTS	DESCRIPTION	MONTHLY DUE
ATHLETE #3	MONTHLY TUITION	ADJUSTMENTS	DESCRIPTION	MONTHLY DUE
<b>Initial Monthly Total</b> (deducted on the 2 <sup>nd</sup> of each month). Changes may occur with customer authorization.				\$

**Please attach your voided check here.**

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