



Golden Sol Yoga & Wellness Center
4446 Ambrose Avenue, Los Angeles, CA 90027
goldensolcollective@gmail.com / Goldensol.org

Credit Card Payment Plan Authorization Form

The payment installment agreement below is established between Golden Sol Yoga & Wellness and _____ on _____.

You agree to the Payment Plan and Schedule which includes an initial deposit fee as stated below. The deposit will be charged upon registration to secure your place in the training. Additional payments will follow on the 15th of every month per the outlined schedule until total is paid off. Upon full payment the auto pay contract will be terminated.

Costs:

Registration Date	Payment Plan Options
Paid on or before July 21st	Payment Plan Total \$3,600. Deposit Due of \$1000, 4 installments of \$625.
Paid <i>after</i> July 21st 2016	Payment Plan Total \$3,750. Deposit Due of \$1200. 6 installments of \$425.

I _____ authorize **Golden Sol Yoga & Wellness** to charge my credit card indicated below to discharge the above debt for 220 Hour Yoga Teacher Training, using installment (description of goods/services)

payments in the amount and schedule indicated.

Credit Card Type _____

Last 4 _____

Billing Address _____

Phone# _____

City, State, Zip _____

Email _____

SIGNATURE _____

DATE _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. If the above noted payment date(s) fall on a weekend or holiday, I understand that the payment may be executed on the next business day. I understand that this authorization will remain in effect until the debt is fully discharged or I cancel it in writing which ever comes first, and I agree to notify the business in writing of any changes in my account. I certify that I am an authorized user of this credit card and that I will not dispute the payments with my credit card company; so long as the transaction corresponds to the terms indicated in this form.