



journey home yoga

Automatic Credit Card Billing Authorization Form

If you would like the convenience of automatic billing, simply complete the Credit Card Information section below and sign the form. All requested information is required. We will automatically bill your credit card for the amount indicated 7 days before the start of the next session. You may cancel this automatic billing authorization by contacting us at least 8 days before the start of the next session.

Payment Information

I, _____ authorize Journey Home Yoga to automatically bill the card listed below monthly for the amount specified:

Amount \$ _____

Credit Card Information Only Visa and Mastercard are Accepted

Credit card type:	Credit card number	Expires
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard		
Credit card billing street address:	City:	State
Cardholders name (as shown on card)	Cardholders Zip Code (required)	
Customer's signature	Date	