



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Automatic Payment Authorization

BFYMCA Branch: Pittsfield Northern Berkshire Bennington

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

I authorize my bank or credit card institution to honor Electronic Funds Transfers or credit card charges against my account for membership/childcare/programs/contributions payments as indicated below. When the bank or credit card institution honors the EFT transfer or credit card charge by charging my account, such transfer shall constitute notice of payment due and my receipt for the payment. Should any preauthorized EFT transfer or credit card charge not be honored by said bank or credit card institution when received by the Y, then it is understood that the payment is to be made by me in the amount of said payment plus applicable service charges. It is further understood that if such payment is not honored by the bank or credit card institution, then the Y, at its discretion, may resubmit the amount due for payment on a future date.

I choose to utilize the EFT option for monthly (for membership) or weekly (for childcare/camp) payments from my: Checking Savings account.

Bank Name: _____

Name on Account: _____

Routing/Transit Number: _____

Account Number: _____

Authorized Signature: _____ Date: _____

I choose to utilize the credit card payment option for monthly (for membership) or weekly (for childcare/camp) payments from my: Visa Mastercard AMEX Discover

Cardholder's Name: _____

Card Number: _____

Expiration Date: _____

Authorized Signature: _____ Date: _____

Non-Sufficient Funds Procedure: If your check/ACH draft is returned unpaid, it will be collected electronically and you will be assessed a minimum fee of \$25 (or the maximum amount allowed by law). Check writer is also responsible for all other collection costs.

I, _____, agree to be charged \$ _____ each (choose one) month or week. Membership payments are debited on the (choose one) 1st or 15th of month. Childcare payments are debited each Monday morning. The payment will be charged to the method stated above.

Signature

Date

BERKSHIRE FAMILY YMCA: www.bfymca.org

Pittsfield (Corporate Office): 292 North Street, Pittsfield, MA 01201 P: 413-499-7650 F (All Locations): 888-965-0663

Northern Berkshire: 22 Brickyard Court, North Adams, MA 01247 P: 413-663-6529

Bennington Recreation Center: 655 Gage Street Bennington, VT 05201 P: 802-442-1053

REV 8/5/21