

Firstfruits Membership Plan - Recurring Payment Authorization Form

Ready to Join? Schedule your monthly payment to be automatically deducted from your bank account on the 1st of each month. (Initial payments will be pro-rated based on the week of the month that you join.) Member benefits begin upon receipt of initial payment. Complete and return form to get started!

How Recurring Payments Work:

You authorize regularly scheduled charges to your checking or savings account. The amount indicated below will be charged at the start of each billing period.* The charge will appear on your bank statement as an "ACH Debit."

*You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from Firstfruits at least 30 days prior to the payment being collected.

| Please complete all fields, then sign and date below: | | | |
|---|--|--------------------|-----------------------------|
| Ι | authorize Firstfruits to charge my form of payment | | |
| (full name) indicated below for \$40.0 | | | |
| Membership Plan Fee. (N | lote: If this date falls | on a weekend or ho | oliday, Fee will be charged |
| on the next business day | ·.) | | |
| Billing Address | | _ Phone#_ | |
| City, State, Zip | | Email | |
| | Checking/ Sa | vings Account | |
| | Checking | Savings | |
| | Name on Acct | | |
| | Bank Name | | |
| | Account # | | |
| | Bank Routing # | | |
| | Bank City/State | | |
| | Routing Number Ac | | |
| SIGNATURE | | D | DATE |

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Firstfruits in writing of any changes in my account information or termination of this authorization at least 30 days prior to the next billing date. If the above noted payment date falls on a weekend or holiday, I understand that the payments may be executed on the next business day. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, these funds may be withdrawn from my account as soon as the above noted periodic transaction date occurs. In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF) I understand that Firstfruits may at its discretion attempt to process the charge again within 30 days, and I agree to an additional \$15 charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this bank account and will not dispute these scheduled transactions with my bank; so long as the transactions correspond to the terms indicated in this authorization form.