



**EZDebit Recurring Payment Customer Information**

Authorization to charge your checking account automatically  
For Unlimited Monthly Yoga Classes (not including workshops)

**Billing Information**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Email (please print clearly) \_\_\_\_\_

**Checking Account Information** EZDebit processes CHECKING ACCOUNT transactions ONLY (no credit cards).

Account Type **Personal or Business** (circle one)

\*Bank Routing Number \_\_\_\_\_ \*Bank Account Number \_\_\_\_\_

**Terms of Monthly Debit**

- \_\_\_\_\_ I authorize a monthly automatic debit on the account specified above for \$108 per month for a 12 month period
- \_\_\_\_\_ I agree to a one time \$40 set-up fee.
- \_\_\_\_\_ I understand I will be initially charged (first month only) the monthly (\$108) charge plus the setup fee (\$40).
- \_\_\_\_\_ I understand this is a **12 month enrollment contract** between myself and Yoga Loka.
- \_\_\_\_\_ I authorize a \$25 payment for all dishonored checks (non-sufficient funds).

**Terms of Auto Monthly Termination**

- \_\_\_\_\_ I understand a **30 day written notice** is required in order to terminate my Auto Monthly Debit Enrollment. Without written notice, the contract will continue uninterrupted.
- \_\_\_\_\_ I agree to mail my written cancellation to: **Yoga Loka, 6135 Lakeside Dr #221, Reno, NV 89511**  
**or email: [info@yogalokareno.com](mailto:info@yogalokareno.com)**
- \_\_\_\_\_ I understand my last payment will be charged on my regular payment date within 30 days of receipt of written notice of cancellation.
- \_\_\_\_\_ I understand if I cancel my enrollment before the end of the 12 month period I signed up for, I will be charged a **\$125 cancellation fee.**
- \_\_\_\_\_ I understand that a one time "interruption" of the contract for an emergency situation (illness, injury, family emergency) is allowed per year. After that a \$30 processing fee will apply per interruption. Written notice sent to Yoga Loka is required for all situations.

By signing below, I agree to the terms above and authorize YOGA LOKA to debit my checking account (account number and routing number listed above) for the amount of \$108.00 (plus the one time \$40 set-up fee) that will be scheduled once per month for the next 12 months beginning the month of \_\_\_\_\_.

I agree that this auto withdraw will occur on the \_\_\_\_ day of the month (customer's choice).

\_\_\_\_\_  
CUSTOMER SIGNATURE

\_\_\_\_\_  
Date