

# PORTSMOUTH

## RECREATION DEPARTMENT

### CITY OF PORTSMOUTH RECREATION DEPARTMENT DIRECT PAYMENT AUTHORIZATION

With the Direct Payment Plan, you have the option to have your monthly Membership fee debited automatically from your checking or savings account, or charged to your credit card.

<b>Facility (please circle one):</b>	<b>Spinnaker Point</b>	<b>Indoor Pool</b>
<b>Member Name:</b> _____	<b>Member #:</b> _____	
<b>Contact Phone Number:</b> _____	<b>Monthly Fee:</b> _____	

To initiate this service, please complete the form below.

1. Supply your name and address.
2. Indicate whether your payment will be charged to a Credit/Debit card or deducted from your checking/savings account.
3. Incomplete forms will be returned, unprocessed, and your membership will be put on hold until the form is completed.
4. Your signature is required.

*Terms and Conditions:*

- The signature below authorizes the City of Portsmouth to initiate monthly electronic debit entries to your checking or savings account, or to initiate monthly charges to your credit or debit card and accepts the terms and conditions established by the City.
- The amount debited monthly from the account or charged monthly to your card will be the "Monthly Fee" shown above.
- Should a fee change affect your Monthly Fee, you will be notified 30-days prior to the change via email.
- There are no additional fees for Direct Payment transactions.
- Existing City fees/penalties will be assessed for returned transactions due to non-sufficient funds or disputed charges.
- The authorization to debit your account or charge your card will remain in effect until we receive written notification from you to terminate. This notification to terminate must be received at least fifteen (15) days prior to the 1<sup>st</sup> of the month you wish to terminate, in order to stop the charge to your credit card or debit to your account for the following month. Termination requests should be sent to the facility in which you are a member.

**Please circle one of the following:**      **Credit/Debit Card**      **Checking/Savings Account**

**Last four (4) digits of account #:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name (on account):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State & Zip:** \_\_\_\_\_

**Signature:** \_\_\_\_\_      **Printed Name:** \_\_\_\_\_