



304 Indian Trace Suite 816
Weston, FL 33326
954-290-8446

Recurring Payment Authorization Form

Schedule your payment to be automatically deducted from your bank account, or charged to your Visa, MasterCard, American Express or Discover Card. Just complete and sign this form to get started!

Recurring Payments Will Make Your Life Easier:

- It's convenient (saving you time and postage)
Your payment is always on time (even if you're out of town), eliminating late charges

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your checking/savings account or credit card. You will be charged the amount indicated below each billing period. A receipt for each payment will be emailed to you and the charge will appear on your bank statement as "secure pay.com" complete counseling dependent upon the payment option you select. You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

Please complete the information below, add your signature and send form to us.

- Fax to 480-666-0741
Scan and email to support@AddictionsTrainingInstitute.com
Take a Photo (has to be clear!) and text it to us 954-290-8446

I \_\_\_\_\_

authorize CE-Classes.com to charge my credit card indicated below:

\$\_\_\_\_\_ per month for \_\_\_\_\_ monthly payments which equals \$4,000.
First payment made on \_\_/\_\_/\_\_\_\_. (MM/DD/YYYY)

I would like future payments to be made on \_\_\_\_ day of each month.

Visa Master Card American Express Discover

Cardholder Name: \_\_\_\_\_

Credit/Debit Card# : \_\_\_\_\_ Exp Date: \_\_\_\_\_

Billing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email: \_\_\_\_\_ Phone# \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

I understand that this authorization will remain in effect until paid in full, or I cancel it in writing. I agree to notify CE-Classes.com in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. In the case of a transaction being rejected I understand that CE-Classes.com may at its discretion attempt to process the charge again within 30 days, and agree to an additional \$35 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 credit card/bank account and will not dispute these scheduled transactions with my bank or credit card company; so long as the transactions correspond to the terms indicated in this authorization form. I also understand that no certificates or transcripts will be released by ATI or CE-Classes.com until I have paid all tuition and fees.