

AUTHORITY TO CHARGE CREDIT CARD

I, _____, the undersigned, authorise The Body Refinery Physiotherapy Pty Ltd to initiate payment transactions for invoices from The Body Refinery using the credit card details provided on this form. **The pack I choose to repurchase is** (*please circle your choice*):

5 PACK / 10 PACK of CLINICAL / STUDIO / STRENGTH AND CONDITIONING / SPECIALISED CLASSES

Please, list the class/es you wish to be booked into until the end of the year (depending on availability):

Day: _____ Time: _____ Teacher: _____

Day: _____ Time: _____ Teacher: _____

CLIENT DETAILS

Mr/Miss/Mrs/Ms/Dr Name: _____

Phone: _____ Email: _____

Postal address: _____ Post code: _____

CARD INFORMATION

Card Type: Mastercard/Visa Card Number: _____

Expiry Date: _____ CCV: _____

Cardholder's name: _____

Cardholder's signature: _____

CONDITIONS

- This form gives authority to The Body Refinery Physiotherapy Pty Ltd to charge the clients' credit card to ensure they maintain their classes of preference at The Body Refinery.
- The credit card will be automatically charged when the client has used the last class of the previous pack.
- The client takes responsibility for cancellation of classes.
- Classes cancelled with less than 12 hours notice will result in 100% of the cancellation fee being charged..
- It is the client's responsibility to ensure their credit card details are up to date for charges to be made.

Name: _____ Date: _____

Signature: