VICTORY ELITE GYMNASTICS LLC REGISTRATION PAYMENT FORM

12252 SW 128th Ct, Unit 107 & 110 Miami, Florida 33186

Billing Authorization

I represent and warrant that if I am purchasing something or paying for a service from this facility or from other merchants through this facility that (i) any credit card or bank account draft (ACH Draft) information I supply is true and complete, (ii) charges incurred by me will be honored by my credit card company or financial institution, and (iii) I will pay the charges incurred by me at the posted prices, including any applicable taxes, fees, and penalties.

I hereby authorize (if online payment is made or autopay information is provided) this facility to charge my ACH draft, or credit card account. I understand that a 30-day written notice is required to terminate billing and I am responsible for payment whether or not my gymnast attends classes until I notify this facility in writing to drop my gymnast from class(es).

Should I dispute a charge through my financial institution this will constitute a breach of contract possibly resulting in, but not limited to, penalties, additional fees, collection, legal action, and/or termination of any and/or all current and future services.

Payment Information

Please select a payment method

_____ Credit Card _____ Check _____ Cash

Credit Card Information (if applicable):

Card Number: _____

Expiration Date: _____

CVV: _____

Name on Card: _____

_____ _____

Parent/Guardian Print Name Date

_____

Parent/Guardian Signature