RECURRING PAYMENT PLAN AUTHORIZATION FORM: Credit/Debit Card/ ACH



Complete and return this form to:
All Paws Academy & Resort, LLC
2914 W T C Jester Blvd.
Houston, TX 77018
(713) 900-9113

CREDIT/DEBIT CARD PAYMENT AUTHORIZATION (Please Print)

I authorize All Paws Academy & Resort, LLC, to initiate recurring credit/debit card or ACH charges to the below referenced credit/debit card or ACH account for the purpose of collecting Dog care related services. I understand and accept that All Paws Academy & Resort will charge my account automatically. The amount charged may fluctuate due to various types of services if a return charge for NSF or late payment is assessed for example. I further understand that All Paws Academy & Resort will be deducting any expenses resulting from my dog's care. By signing below, I agree to the above guidelines.

Client's Name:			Phone:		
mail:		Dog(s) Name(s):			
Client's billing address:					
City:	State:		Zip (Zip Code:	
Bank Account Number:					
Routing Number:					
Card Type: □ Visa □ Master Card □ Amex □ Discover					
Card Number:			Expiration	Expiration Date:	
CVV Code:		□ Debit Card □ Credit Card		□ Credit Card	
Signature:			Date	: :	
PLEASE KEEP A COPY OF THIS AUTHORIZATION FOR YOUR RECORDS					