



1391 Martine Avenue, Scotch Plains, NJ 07076 www.jccnj.org 908-889-8800

Automatic Monthly Payment Form

What is the JCC Automatic Monthly Payment Plan?

This program provides a convenient way to pay your JCC membership fee on a monthly basis. With your authorization, the membership fee is deducted from a checking or savings account or a credit card of your choice.

Program BENEFITS:

- Affordable. Monthly payments are easy on your budget.
- Convenient. You save time and mailing costs. With our automatic electronic transfer, there are no checks to write, no postage or stopping in the administrative office every month.
- Continuous Membership Use. Your membership will automatically be renewed each year unless you notify the JCC in writing 30 days prior to your renewal date.

Who is Eligible for Electronic Fund Transfer Payment Plan Program?

Any adult, 18 years of age or older, who has an account (checking, savings, credit, debit) at a participating financial institution.

How do I sign up?

By completing this authorization form and returning it along with a voided check or a valid credit card number and your JCC of Central NJ Membership renewal form, or new membership application.

The check must be pre-printed with the customer's name and account number.

JCC Membership payments will be drafted between the 5th and 10th of each month.
A processing fee of \$3 is included. Thirty days notice is required to end automatic payment.

Membership dues are subject to increases from time to time. You will be notified in writing 30 days prior to any dues increase.

AUTHORIZATION AGREEMENT

I hereby authorize the JCC of Central NJ to initiate electronic fund entries to my

Checking Savings VISA MC AMEX

(NOTE: If using a check, please attach a voided check.) and the Financial Institution or credit card named below to debit my account.

CHECKING:

Financial Institution: _____ City: _____ State: _____

Zip: _____

Routing #: _____ Account #: _____

CREDIT CARD:

Name _____ Address _____

City _____ State _____ Zip _____

Credit Card Number: _____ Security Code: _____

Exp. Date: _____

MUST FILL OUT:

Member's Printed Name: _____ Member's Signature: _____

Date: _____



1391 Martine Avenue, Scotch Plains, NJ 07076 www.jccnj.org 908-889-8800

Membership Payment Form

Member Name _____

Date _____

Member Address _____

City/State/Zip _____

Membership to the JCC of Central NJ requires an initial 12-month contract. Membership is required for preschool, kindergarten, camp and sports leagues. Members may only be released from the annual contract without financial obligation for the following reasons:

1. Medical cancellation. A doctor's letter must accompany this request stating that the member cannot physically use our facility due to a medical problem.
2. Move outside of the area. Proof of the move must accompany the request.
3. If cancellation is needed due to extenuating circumstances, situations will be considered on an individual basis by the Membership Director or the Executive Director.

Once the initial 12-month contract is fulfilled, membership is on a rolling basis*. Monthly credit card or checking account drafts will continue until notification of the cancellation of membership. If you are paying by Electronic Funds Transfer (EFT) (bank auto-draft) or via credit card and do not want to continue, you must send written or e-mail notice to the Membership Director and receive a confirmation at least 30 days before the next draft date. For those paying annually, you will receive a letter at least 30 days before your yearly renewal. This letter is a reminder of your renewal date. Renewing at any time in a membership year will be at the annual membership rate.

A late fee not to exceed \$25 will be assessed for returned checks, insufficient funds, closed accounts, frozen or declined credit cards or similar circumstances, which result in late or delayed payment to the JCC of Central NJ. Member is responsible for providing accurate and updated information on their electronic funds account to insure timely receipt of payment. If you stop payment on your credit card or check draft, we will send a letter of financial obligation to you. Legal action may be taken if necessary. We appreciate your understanding and cooperation.

Membership dues are subject to increases from time to time. You will be notified in writing 30 days prior to any dues increase.

Payment options: JCC Membership can be paid in full or by automatic monthly payment. Automatic monthly payments will be drafted between the 5th and 10th of the month. A processing fee of \$3 is included in the monthly payment amounts.

Financial assistance: Forms must be filled out each fiscal year. Please visit www.jccnj.org or call for a form.

*A registration fee is required with the first month of membership dues. The registration fee is non-refundable. Initial _____

Option #1: Automatic Monthly Payment

I authorize the JCC of Central NJ to draft \$ _____ monthly from (check one):

- MasterCard/Visa/AMEX (required info) ▶
- Checking account (attach voided check)

Option #2: Full Payment

- I have enclosed a check for _____
- I authorize a one-time credit card charge of _____ (required info) ▶

Please charge my: AMEX MasterCard Visa

Credit Card # _____

Security Code _____ Expiration Date _____

Print Name _____
(as it appears on card)

Signature _____

Date _____

Yes! I have included an additional \$100 to become a Friend of the JCC. -or-

Yes! I would like to make a donation of \$ _____

The JCC of Central NJ is a constituent agency of the Jewish Federation of Central NJ, United Way and the United Fund of Westfield. Financial assistance is available for membership and various programs.