Recurring Payment Authorization for Gym Membership

Date: [Insert Date]

To: [Gym Name]

Address: [Gym Address]

Dear [Gym Manager's Name],

I, [Your Name], authorize [Gym Name] to charge my bank account/credit card for my gym membership on a recurring basis. I understand that this authorization will remain in effect until I provide written notice to cancel it.

Payment Details:

Membership Type: [Select Membership Type]

Amount: [Insert Amount]

Frequency: [Weekly/Monthly]

Payment Method:

Cardholder Name: [Your Name]

Card Number: [XXXX-XXXX-XXXX]

Expiration Date: [MM/YY]

Billing Address: [Your Billing Address]

I understand that I can revoke this authorization at any time by providing written notice at least [Insert Notice Period, e.g., 30 days] prior to the next scheduled payment.

Thank you for your attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Contact Information]