

# Recurring Payment Authorization Letter

Date: [Insert Date]

To Whom It May Concern,

I, [Your Name], hereby authorize [Course Provider Name] to initiate recurring payments from my bank account for the enrollment in the online course titled "[Course Name]".

Details of the payment authorization are as follows:

- **Payment Amount:** \$[Amount]
- **Payment Frequency:** Monthly/Quarterly/Annually
- **Start Date:** [Start Date]
- **End Date:** [End Date or Until Canceled]

Please find my bank account details below:

**Account Holder Name:** [Your Name]

**Bank Name:** [Your Bank Name]

**Account Number:** [Your Account Number]

**Routing Number:** [Your Routing Number]

I understand that I can cancel this authorization at any time by providing written notification to [Course Provider Name] at least [Insert Notice Period] days before the next payment date.

Thank you for your assistance.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Name]

[Your Address]

[Your Email]

[Your Phone Number]