



**PLUMBING-HEATING-COOLING
CONTRACTORS ASSOCIATION***
Best People. Best Practices.

Recurring Payment Authorization Form

PHCC offers the option to pay dues in quarterly or annual installments. Installment payments require authorization to implement automatic recurring credit card payments. Please complete this Authorization form and we will automatically process your payment as requested and email a confirmation receipt. Please return this form, dues amounts and installment option **via mail:** 9920 Scripps Lake Drive, Suite 102, San Diego, CA 92131 OR **email** to admin@phccsd.org

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your credit card. You will be charged the amount indicated each billing period. A receipt for each payment will be emailed to you and the charge will appear on your bank statement. You agree that no prior notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

Please complete the information below:

I _____ authorize PHCC-National Association to charge my credit card
(full name)
indicated below on the day of each **<insert frequency>** _____ for
payment of _____ (Chapter Name) _____

_____ membership dues. Member companies, frequency and amounts to credit are attached.

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Credit Card

- Visa MasterCard
 Amex Discover

Cardholder Name _____

Account Number _____

Exp. Date _____

SIGNATURE _____ DATE _____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify PHCC-San Diego in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. For denied payments, I understand that PHCC-San Diego Association may at its discretion attempt to process the charge again within 30 days, which will be initiated as a separate transaction from the authorized recurring payment and a late fee may apply. I certify that I am an authorized user of this credit card/bank account and will not dispute these scheduled transactions with my bank or credit card company; so long as the transactions correspond to the terms indicated in this authorization form.