



Tornado Fitness

635 main st SE
Aumsville, OR 97325
(503) 743-1348

Easy-Pay EFT Authorization Form

I elect to pay my membership dues by automatic Electronic Funds Transfer (EFT)

I, _____ authorize eFit Financial to debit my payment by the method indicated below and post it to my account as: *eFit Financial (Health Club Charge)*. I understand that a \$30.00 charge will be assessed for all returned items.

EFT Billing Information

Checking (Must attach voided check to remain with file) Savings (Must attach deposit slip)
Routing Number: _____ Account Number: _____

Number of Payments: _____ Amount of each Payment: \$ _____ Next Payment Due Date: _____

This form of payment, if discontinued, does not release you from your payment obligation or membership contract.

Bank Information

Bank Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Phone Number: () _____

Date: _____ Account Holder's Signature _____