



# UKnight Training Center

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## Payment Authorization

### ***Single Use Credit/Debit Card Authorization (and/or) Automatic Credit/Debit Card Billing Authorization***

To enjoy the convenience of automatic billing, complete the Credit Card Information section below and sign the form. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us 1 week in advance of the date payment is to be discontinued or changed.

**All group classes require a 30-day written notice when dropping the class.**

**Same day cancellations of private lessons will result in a charge of the full lesson amount.  
Please cancel lessons at least 24 hours in advance to avoid this charge.**

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#### **CUSTOMER INFORMATION (To be completed by merchant)**

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Athlete's/ Participant's Name	Description of Charge/Service	Cardholder's Phone #
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#### **PAYMENT INFORMATION (To be completed by merchant)**

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I authorize *UKnight Cheer and Tumble LLC dba UKnight Training Center* to bill the card listed below as specified – **(Check one)**

\_\_\_\_\_ 1. Pay Per Appointment Booked (Private Lessons and Single Day Classes/Clinics/Camps)

OR

\_\_\_\_\_ 2. Automatic Recurring Payment (Group Classes/Training Sessions/After School Pick-up)  
In the Amount of

\$ \_\_\_\_\_, (frequency monthly), \_\_\_\_\_  
(Notes)

AND a **\$75 Annual Registration Fee**, (frequency annually).

Starts billing on \_\_\_\_\_ and billed the 1<sup>st</sup> of each calendar month thereafter for autopay.

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#### **ACCEPTANCE OF TERMS LISTED ABOVE AND CREDIT/DEBIT CARD INFORMATION (To be completed by Customer)**

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UKnight accepts only the following Credit Cards: Visa, Master Card, American Express, Discover

Card Type	Card Number	Expiration Date	CVV
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Cardholder's Name: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_  
Please Print Name as shown on Card

Cardholder's Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

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#### **OFFICE USE ONLY**

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Updated Card/Set up Auto Pay on MB as of (date) \_\_\_\_\_ by \_\_\_\_\_, and  
Uploaded this form to "Documents" on Participant's MB account on (date) \_\_\_\_\_ by \_\_\_\_\_