

2024-2025 Cheer Extreme All Stars

Draft Authorization Form

For Returning Athletes:

____ New Account

____ Use account on file

**IF same account no
need for Voided Check-
write in info & sign**

Athlete Name: _____

I hereby authorize CHEER EXTREME ALL STARS, hereinafter called the COMPANY, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entry in error to my account indicated below and the Financial Institution named below, hereafter called DEPOSITORY, to debit and/or credit the same to such account. The authority is to remain in full force and effect until the COMPANY has received written notification from me of its termination in such a timely manner as to afford the COMPANY and DEPOSITORY a reasonable opportunity to act on it.

NOTE: 30-day written notice is required to stop draft. Draft will be stopped after 30 days have passed.

Draft shall be used to for registration, tuition, competition fees, crossover fees, coaches fees and skills camp or any applicable athlete fees.

Customer Name: _____

Customer Address: _____

E-mail address: _____

Home Phone: _____ Cell Phone: _____

Bank Routing Number: _____

Account Number to be drafted: _____

Bank Name: _____

Registration:	Comp Fee:
May _____	June _____
Tuition:	July _____
May _____	Aug _____
June _____	Sept _____
July _____	Oct _____
Aug _____	Nov _____
Sept _____	Dec _____
Oct _____	Jan _____
Nov _____	Feb _____
Dec _____	Mar _____
Jan _____	C/O Fee _____
Feb _____	Skills Fees:
Mar _____	_____
Apr _____	Practicewear:

Customer Signature: _____ Date: _____

ATTACH VOIDED CHECK HERE