

Security and Keyless Entry Contract and Agreement

1. I have been given a personal entrance code to use as long as my membership dues are current.
2. I accept the responsibility of keeping my entry code confidential and will not give entrance to anyone at any time.
3. Under no circumstances will I loan or share the entry code with anyone, nor will I use the code beyond the time I have prepaid for access to the gym.
4. I understand gym access/membership is not transferable.
5. A staff member is available by appointment for any guest I schedule to bring to the gym. Any guest MUST be attended by a staff member of BeneFit for Women.
6. No child is allowed in car seats or sitting in the gym.
7. In the event I am at the door at the time someone else is I am not allowed to hold the door for anyone at any time.
8. I **WILL NOT** admit entrance to anyone (including members) without prior consent by owners.

I understand the above policy is strictly enforced and the penalty for the first and every offense is a minimum fine of \$300 and revocation of membership with no refund. I am responsible for 100% of all collection and legal fees associated with a breach of this contract.

Printed Name_____

Signature_____

Date____/____/____

BeneFit Representative_____

Authorization Agreement for Direct Debit/Charge

I authorize **BeneFit for Women LLC**, Shelly Coffee, to initiate debit entries to my account indicated below.

PHOTO

This authorization is to remain in full force until such time that the company has received a **30-day cancellation notice** which affords the Company and the Bank a reasonable opportunity to act upon it. I agree and understand that if the bank returns the check draft unpaid because of insufficient funds or any other reason, or if the debit/credit card charge is declined for any reason, **I will pay BeneFit for Women \$27.00 for the dishonored check draft/declined charge.**

Bank Name _____

Checking [] Savings []

Routing # _____ Acct # _____

Monthly Draft \$ _____ Beginning Date ____/____/____

Initial Payment \$ _____ Date ____/____/____

CC# _____

Expiration Date _____ CVV _____ Zip _____

Monthly Draft \$ _____ Beginning Date ____/____/____

Initial Credit Card Charge \$ _____ Charge Date ____/____/____

Draft membership for _____

Signature _____ Date ____/____/____