



Membership Payment Plans

The JEWISH COMMUNITY CENTER
of Greater Kansas City

5801 W. 115th Street • Overland Park, KS 66211-1800
913-327-8000 • www.jcckc.org

Your membership means year-round access to our Kansas City facilities, plus programs, classes, and special events for every member of the family. We value your membership. After all, **YOU** are what the Jewish Community Center is all about!

If you have any questions about your payment plan, please call Accounting at 913-327-8036. You have a choice of convenient payment plans.

1. PAYMENT IN FULL

You may pay in full at your join or renew date by cash, check, or credit card (MasterCard, VISA, or Discover).

2. INSTALLMENT PLANS

You may authorize a checking account withdrawal or credit card or debit card charge of equal installments monthly, bi-monthly, or quarterly commencing on your join date or in the month of your renewal.

PAYMENT AUTHORIZATION

(Please print.)

Name(s): _____

Membership #: _____

Address: _____

City/State/Zip: _____

Home Telephone: _____

Second Telephone: _____

I agree to the following payment plan:

1. PAYMENT IN FULL

- Payment is enclosed
- Please see information on other side of the form to set up an EFT or charge to a credit/debit card.

Continue on next page after signing below.

2. INSTALLMENT PLAN

Since I am not paying in full, I will use one of the automatic payment plans.

- EFT from a checking account
- Charge to a credit/debit card

I request that this payment be made on approximately

- The 10th of the month
- The 25th of the month

Continue on next page after signing below

I fully understand if payments are not made in accordance with this plan, I surrender all membership privileges and program participation for all family members on my account.

Signature: _____ Date: _____

Continue on Next Page

Please complete other side of form, also.

AUTHORIZATION FOR "CENTER CHECK"

CREDIT/DEBIT CARD PAYMENTS

Please charge equal payments

Semi-Monthly Monthly Quarterly

Credit card type: MasterCard VISA Discover

Card #: _____

Exp. Date: _____ Today's Date: _____

Name on card: _____

I authorize the Jewish Community Center of Greater Kansas City to receive payments for my membership dues and any added services. I authorize charges from my credit/debit card for consecutive equal installments for _____ months.

Signature: _____

Please charge equal payments

Semi-Monthly Monthly Quarterly

Please attach a **voided blank check** and sign below.

Name(s) on Account _____

Bank Name _____

Bank Address _____

City/State/Zip _____

Acct. # & Routing # _____

I authorize the Jewish Community Center of Greater Kansas City to receive payments for my membership dues and any added services. I authorize _____ Bank to automatically deduct from my account consecutive equal installments for _____ months.

Signature: _____ Date: _____

Signature: _____ Date: _____

This Authority will **remain in effect** until the Jewish Community Center receives my written cancellation dated 30 days before it is to take effect and has had reasonable opportunity to act on it, or until the Jewish Community Center has sent me 30 days written notice of cancellation. This agreement shall be **renewed automatically** for succeeding terms of one year each or six months each, depending on my membership category, unless either party gives advance written notice to the other of at least 30 days.

OFFICE USE ONLY