



Rotary Club of Boise, Inc.  
P.O. Box 1636, Boise, ID 83701  
billing@boiserotary.org

### AutoPay Authorization Form

For your convenience, we recommend autopay for bimonthly invoices. To enroll, please select one option below, fill out the section, sign/date the bottom, and return this form to the Club Treasurer or mail it to the PO Box shown on the upper right corner of this form. You will still receive bimonthly invoices for your review and records. Autopay transactions will occur approximately thirty (30) days after each invoice date. This authorization will remain in effect until cancelled. You may cancel it at any time by contacting us.

**Direct debit bank account (ACH)**

Type of Account:  Checking  Savings

Account # \_\_\_\_\_ Routing # \_\_\_\_\_

Name(s) on Account: \_\_\_\_\_

Bank Name: \_\_\_\_\_

**Credit card: a 4% transaction fee will be added**

Type of Card:  Visa  MasterCard  AMEX

Name on Card: \_\_\_\_\_

Card #: \_\_\_\_\_ Exp: \_\_\_\_\_

Security Code: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

I, \_\_\_\_\_, authorize Rotary Club of Boise, Inc. to charge the account stated above. I understand that my information will be saved to file for future transactions.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date