

Dearborn County YMCA Cardiac Rehabilitation

Fees and Payment Options

Please take a few minutes to review the information we have on file for you. If any of the information we have provided is incorrect, please make changes directly on this form.

PERSONAL INFORMATION:

Name
Address
Telephone

FEES:

Cardiac Rehab Fees:			<u>\$50</u>
Silver Sneakers Discount:	Yes	No	_____
Scholarship Discount:	Yes	No	_____
Spousal Discount:	Yes	No	_____

Final Monthly Payment: _____

PAYMENT OPTIONS:

You are **currently** paying your fees by EFT. Your EFT (*if applicable*) is drafted on the 1st of the month. Please select how you want to pay your fees **now**:

- Cash/Check
- Electronic Funds Transfer (EFT)

If you have chosen to have your payment electronically drafted from your account, please complete the following information:

- I already have an EFT and would like to continue to have my cardiac fees deducted from that account.
- I would like to create a new EFT to have my cardiac fees deducted from:

Name of Financial Institution: _____

Account Number: _____ I would my fees to be withdrawn on the

- 1st of the month
- 16th of the month

I understand have the right to withdraw from the Cardiac Rehab Program and end this EFT at any time. However, I understand that it takes 10 days to end this EFT. If my Cardiac Rehab Program fees withdraw on the 16th of the month and I wish to withdraw from Cardiac Rehab and not pay my monthly program fees, I will give my notice at least 10 days before the 16th of the month. I understand that if I withdraw from the Cardiac Rehab Program with less than 10 days advance notice of my EFT date, the specific Cardiac Rehab Program fees will still be drafted from my account. I can continue to use the Cardiac Rehab Program for one additional month.

Signature: _____ Date: _____