TRESTLE
art *forward*

Preferred Payment Form

Name: _____ Monthly studio membership amount: _____
Address: _____ Phone number: _____ Email: _____

Please select <u>one</u> from the FOUR payment options below:

1. **ACH transfer** No fee! Please provide a voided blank check or fill out the info on the lines provided and sign at the bottom of the form. *** ACH payments will be processed on the 1st of every month.

- Name as it appears on your bank account: _____
- Routing number (not including check number): _____
- Account number: _____

2. **Personal check** ($7 monthly processing fee). Add $7 to the amount of your membership payment and mail or personally drop off your check (during office hours) to the office no later than the 5^{th} of the month.

3. **Credit Card** (3% of your monthly membership fee). Add 3% to the amount of your membership payment to pay by credit card each month and/or set up an automatic* payment which bills automatically on the first of the month and sign at the bottom of the form.

   Charge automatically each month: initial: ____
   Credit card number:_____ Expiration date:_____ Code:_____

4. **Pay cash** to the office each month during office hours no later than the 5^{th} of the month.

☐ I Authorize Brooklyn Art Space / Trestle Studios LLC to run payment for first month, last month and damage deposit at the beginning of my membership.

*For ACH or automatic payments:
I authorize Brooklyn Art Space to set up automatic payments for membership fees. I can request to change this option by submitting a request in writing 7 days prior to the end of the month.

Signature: _____ Date: _____