

Flying Spikes Baseball Club, Inc

AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBITS)

I (we) authorize Flying Spikes Baseball Club Inc (COMPANY) to electronically debit my (our) _____ Checking Account/ _____ Savings Account (select one) indicated below at the depository financial institution named below, hereafter called DEPOSITORY, (and to credit the same to such account to correct erroneous debits.)¹ I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of the law.

Depository Name _____

Routing Number _____ Account Number _____

Amount of debit(s) or method of determining amount of debit(s) [or specify range of acceptable dollar amounts authorized]: \$60.00

Date(s) and/or frequency of debit(s): 5th of every month

I (we) understand that this authorization is to remain in full force and effect until I (we) notify COMPANY in writing that I (we) wish to revoke this authorization. I (we) understand that COMPANY requires at least 30 days prior notice in order to cancel this authorization.²

Name(s) _____

Date _____ Signature(s) _____

1 The NACHA Operating Rules do not require the consumer's express authorization to initiate Reversing Entries to correct erroneous transaction. However, Originators should consider obtaining express authorization of debits or credits to correct errors.

2 Written debit authorizations must provide that the Receiver may revoke the authorization only by notifying the Originator in the time and manner state in the authorization. The reference to notification should be filled with a statement of the time and manner that notification must be given in order to provide company a reasonable opportunity to act on it (e.g., "in writing by mail to 100 Main Street, Anytown, NY that is received at least three (3) days prior to the proposed effective date of the termination of authorization").