



NINTH FLOOR
club + venue

Mail to:
Ninth Floor Club + Venue
100 N. Broadway, Ste 900
Wichita, KS 67202

**Direct Payment (ACH Debit)
Authorization Agreement
For Ninth Floor Accounts**

Email to:
Karri@ninthfloorwichita.com

All charges incurred on this Ninth Floor account will be billed monthly. The undersigned hereby agrees to pay all member dues, food, beverages, service charges, sales tax and other charges incurred by the undersigned, immediate family members and their guests and to pay the account when due. All returned items will be subject to a \$30 fee. The undersigned further agrees to pay all reasonable attorneys' fees, investigation fees and other costs incurred in connection with the collection of delinquent accounts.

I (we) hereby authorize Ninth Floor, LLC dba Ninth Floor Club + Venue to debit entries to my (our) account indicated below, and authorize the Financial Institution indicated to debit same to such account. I (we) acknowledge the organization of ACH transactions to my (our) account must comply with the provisions of U.S. law. I (we) understand that this authorization will remain in full force and effect until I (we) notify Ninth Floor in writing that I (we) wish to revoke this authorization. I (we) understand that Ninth Floor requires notice by the first of the month in order to cancel the debit transaction as authorized

REQUIRED: ATTACH VOIDED CHECK HERE or provide BANK FORM
Updating financial information is the responsibility of the member.

Type of Account: _____ Checking: Savings: _____

I authorize this account to be used for monthly ACH DEBIT for incurred balances on my Ninth Floor account on the 10th of each month or first business day thereafter.

Signature of Member or Authorized Business Representative _____
Name of Member or Authorized Business Representative (printed) _____