



Membership start date:	
Specials:	
CC Confirmation	



Individual Payment Authorization Form

Member information

Full Name: _____ Company: _____

Phone: _____ Fax: _____

Email: _____

Address: _____

Building Access Card # (on back of card): _____

I have read and confirmed my agreement to the terms and conditions set forth in the Membership Agreement: (Initial here) _____

Payment Options

Monthly Payment (\$10/month)

Annual Payment (\$100/year)

Credit Card Billing Information

Card Type _____



Credit card number _____ Exp. date _____

Same address as above

Billing Name: _____

Billing Address _____

I hereby authorize the purchase of services from T-C 4th & Madison LLC through the use of this Payment Authorization Form. I agree that I will pay for this purchase and indemnify and hold harmless T-C 4th & Madison LLC, Hines Interests Limited Partnership, and their officers, agents, employees, representatives, executors, and all others acting on their behalf from and against any liability pursuant to this authorization. I authorize my bank/credit card company to make my recurring payment and to post that payment to my account. Should any monthly payment become more than ten days past due, I understand that I will be charged a late fee in the amount of \$10 (ten dollars). I further understand that I may be charged an additional service fee of \$10 at the discretion of Property Management for any payments declined for insufficient funds and/or an expired or no longer valid credit card.

Signature: _____ Date: _____