



## **BELLADERM For Life Bank Draft Form**

As a member of the Belladerm For Life program, you will be able to work with our experts to achieve the best results. This requires regular services and a great medical grade home care product regime. With these discounts on our products and services, all your goals are within reach.

**15% off all services and 15% off all products!!!**

The membership fee is **\$100.00 per month**. This fee will be charged to the credit card of your choice. Your membership can be used every month or balances **can** be carried forward to use on future services.

Please complete the entire form:

I authorize Belladerm MedSpa to debit my credit card listed below for the monthly fee of \$100.00. The debit will happen on or around the 1st of each month. I will remain a member for at least **3 months**. This draft is to remain in force until intent to withdraw is given in writing to Belladerm MedSpa.

**Charge Card Type:**      VISA            Mastercard      Discover      American Express

**Charge Card Number:** \_\_\_\_\_

**Exp. Date:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Sec. Code:** \_\_\_\_\_

**Name As It Appears On Card:** \_\_\_\_\_

**Charge Card Holders signature:** \_\_\_\_\_