



Student Name: \_\_\_\_\_

### AUTHORIZATION for automatic lesson payments

To authorize a monthly payment to Fieldstone Farm from your credit card, simply fill out this form and return it to Leslie Mapes, COO.

Your payment will be automatically transferred on the first of each month. Please allow 3 weeks for the authorization to take effect.

**Please mail or email completed form to: Leslie Mapes**

Fieldstone Farm  
16497 Snyder Rd.  
Chagrin Falls, OH 44023  
440.708.0013 ext. 131  
[www.fieldstonefarmtrc.com](http://www.fieldstonefarmtrc.com)  
[lmapes@fieldstonefarmtrc.com](mailto:lmapes@fieldstonefarmtrc.com)

I authorize my financial institution to automatically transfer my monthly lesson payment in the amount of \$ \_\_\_\_\_ from my credit card account:

Choose: VISA or Master Card

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Billing Address of the card: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

-----  
Please list a current email address for the person responsible for payment:

Email Address: \_\_\_\_\_

Name: \_\_\_\_\_