



Auto-Pay Freeze Request Form

Clients enrolled in monthly Auto-Pay programs may elect to freeze their Auto-Pay two times each calendar year, according to our Auto-Pay freeze policy below:

- You can freeze your Auto-Pay two times each year at any time in up to **6 month** increments.
- **This freeze must begin at the start of a billing cycle and can only be requested in monthly increments for up to six months.**
 - **Example:** *If your Auto-Pay is deducted on the 15th of every month and you want to freeze starting October 19th, you need to submit your request **NO LATER THAN** Sept. 15th. A freeze can't start in the middle of a billing cycle; it has to start at the beginning.*
- To request a freeze, this form must be completed and submitted via fax or in person to the studio.
- Following the end of your requested freeze period, your monthly auto-renew will automatically be reactivated.

In order to process your freeze correctly, please complete all information below, and please be sure to sign and date the bottom.

Client Name: _____
First Last

Freeze Start Month: _____

NOTE: *The freeze will start for this month based on your billing cycle.*

Freeze End Month: _____

Total number of months for freeze: _____

I have read and understand the above policies and agree to these terms:

Print Name

Signature

Date