



# EZPAY Enrollment Form

BANK DRAFT or CREDIT CARD PROGRAM

## FOLLOW THESE 5 STEPS

1. **SELECT YOUR SUBSCRIPTION LEVEL.** Your bank account will be debited monthly at the appropriate rate below.

**Home Delivery Only Monthly Rates -**

Daily and Sunday:	\$15.67
Weekend (Fri., Sat., Sun.):	\$11.33
Sunday Only:	\$ 9.50

2. **SELECT THE DAY OF THE MONTH** for the debit to your bank account or credit card.

5th                      15th                      25th

3. **COMPLETE THE INFORMATION BELOW**

Customer Name: _____	<b>The Sun News Acct#</b> _____
Delivery Address: _____	
City: _____	State: _____ Zip: _____
Home Phone: _____	Business Phone: _____

<b>Bank Name:</b> _____
<b>Bank Routing Number:</b> _____ <b>Bank Account #</b> _____
(See diagram on back page)

**OR**

<b>Credit Card Type (circle one):</b> Visa /    Master card /    American Express
<b>Credit Card Number:</b> _____ - _____ - _____ - _____
<b>Credit Card Expiration Date:</b> ____ / ____

4. **ENCLOSE A CHECK** for the first monthly payment (credit cards will be charged 1<sup>st</sup> monthly payment) to ensure uninterrupted paper delivery.

5. **MAIL FORM TO:    The Sun News, P.O. Box 406, Myrtle Beach, SC 29578-0406.**

I agree to the terms and conditions listed on the back of this form.

_____	_____
Account Owner Signature	Date
_____	_____
Joint Account Owner Signature	Date

## EZ PAY PROGRAM

- The same amount will be debited from your bank account or credit card each month.
- The amount will be debited on the day you selected or the first business day after the day you selected if the date falls on a weekend or holiday. If your credits exceed your monthly charge, we will not debit your account for that month.
- All rates are subject to change with 30 day written notice to subscribers. Home Delivery subscribers will be charged an additional \$1.50 for the Thanksgiving Day paper. The additional charge will not change your monthly draft amount, but will decrease your available credit on your The Sun News account.
- Any changes in banks, bank account, or credit card numbers must be communicated by completing and mailing a new EZ Pay form with a voided check (not deposit slip) enclosed for bank drafts. Changes must be communicated at least (8) eight business days prior to the effective date of the change.
- Vacation Procedures:

**Without a Restart Date** - If you request a vacation stop on your account without a specific restart date, paper charges and monthly bank drafts will continue until you return. Upon restart of your paper, you will be credited for the vacation days on your next scheduled draft date.

**With a Restart Date** – If you request a vacation stop on your account with a specific restart date, paper charges and monthly bank drafts will stop until the restart date.

## TERMS AND CONDITIONS OF AUTHORIZATION

By signing this agreement, I authorize my financial institution to charge my account monthly for the amount checked in Section 1 on the reverse side and to make that payment to *The Sun News*. The monthly charge will appear on my bank statement for the date of the first business day indicated in Section 2 on the reverse side.

In addition, I have the right to stop payment of a charge by notifying *The Sun News* at least (8) eight business days prior to the charging of my account.

The authority will remain in full force and effect until revoked by my financial institution, *The Sun News* or me.

I will notify *The Sun News* of any change in address, financial institution or account at least (8) eight business days prior to the change. I understand that, if necessary, an adjusting debit or credit entry may be made to correct an entry made in error. I also authorize my financial institution to credit or debit my account for the correcting entries. I certify that I am an authorized signer of this account and have the right to enter into this agreement.

The diagram shows a check form with the following fields and labels:

- Your Name:** 123 Your Street, Your Hometown, State 12345
- Date:** 12-03
- Pay to the Order of:** \$ [ ]
- DOLLARS**
- YOUR CHECK**
- Memo:** [ ]
- ABA/Routing Number:** 123456789
- Account Number:** 1234567890101
- Check Number (NOT REQUIRED):** 1026
- 12-3/ 456 XX 789**