## **FACIALS BY FRANCINE,LLC**

## MEMBERSHIP AGREEMENT

25 Wall Street

Rockaway, NJ 07866

973-627-4313

MEMBERSHIP ID NUMBER:
MEMBER NAME:
MEMBER ADDRESS:
MEMBER PHONE NUMBER:
You have elected to pay your membership on a monthly basis
Your membership term begins onand expires on
Your membership dues of \$59.00 (plus tax) will be due on
and then due on or after the same day of each month hereafter until your membership expires or is terminated in accordance with this agreement.
(Initial) Your initial membership is for the term above, and thereafter is auto-renewable. Following the initial term, your membership will automatically continue on a month-to-month basis at \$59.00 plus tax until your membership is cancelled by you. During your initial term, you may cancel your membership at any time. Payments due prior to the effective date will be charged as scheduled. You may use any accrued membership services for 30 days after your final membership payment has been processed. No refunds will be given for any remaining unused sessions.
(Initial) You have the entire initial and renewed term of the membership agreement to use all membership services. You may continue to redeem your membership services as long as your membership is in effect and is current. Upon termination or cancellation of your membership for any reason, all unredeemed membership services will expire 30 days after the final membership payment has been processed.
(Initial) A 24 hour cancellation notice is required. If you do not cancel or show for an appointment your service will be forfeited.
By signing below, I authorize Facials by Francine, LLC to charge the account I have specified. Monthly dues and/or renewal fees will be withdrawn on or after the same day of each month. I understand Facials by Francine, LLC may continue to charge my account or cancel my membership in accordance with the terms and conditions of this agreement. Additionally, I authorize Facials by Francine, LLC to charge my credit card on file in lieu of presenting it for any services received, at my request.
We agree to sell and you agree to purchase the membership, goods and services described herein. You agree to pay us for the membership, goods and services according to the payment schedule above. Your signature below indicated your agreement to be bound by the terms, conditions, rules and regulations of the Agreement. All buyers and members signing this Agreement are equally responsible for paying it in full.
Payment Method: Credit Card Number
Expiration Date

Three Digit Code on Back
YOU ACKNOWLEDGE RECEIVING AND READING A COMPLETED COPY OF THIS AGREEMENT BEFORE SIGNING.
MEMBER SIGNATURE:
DATE:
FACIALS BY FRANCINE, LLC:
DATE