



## APA's Direct Debit Program

**Apply for APA's electronic dues payment program. It's automatic. It's convenient. It's free!**

APA now offers more affordable options for members to manage their annual dues. If you are joining or renewing your APA membership, you qualify to pay for your membership and other services provided by APA electronically by monthly deductions from your U.S. bank account or charge to your credit card. You can elect to pay your annual fees in as many as 12 equal installments.

**Important details:**

1. APA offers this service to individuals paying their own dues—agencies paying employees' membership dues do not qualify.
2. If APA receives your application for the Direct Debit Program by the 20<sup>th</sup> day of the month before your membership period begins, you may divide your membership dues into 12 equal monthly payments. If received after your membership period begins, your payments will be divided equally among the remaining months of your membership year.
3. If APA receives your application on or before the 20<sup>th</sup> day of the month, your first payment will occur on the first business day of the following month. Otherwise, your first payment will occur on the first day of the second month following receipt of your application.
4. If you wish to cancel the Direct Debit Program, APA must receive your request to cancel in writing at least five business days prior to your next scheduled payment.
5. There will be no refunds for withdrawals or charges to your bank account or credit card for services rendered.
6. APA will remove you from the direct debit program if there are insufficient funds in your account.
7. You cannot add or change services covered through the Direct Debit Program after we receive your application. You may purchase additional services separately by credit card or check.
8. **You must reapply for APA's Direct Debit Program every year** when you receive your annual renewal invoice.
9. There is no fee to start or to cancel direct debit service.

### Authorization Agreement for Pre-Arranged Electronic Payments

(Please choose a payment option, enter the information requested, sign, and return to APA)

I authorize the American Planning Association to deduct monthly payments for my membership and services during the applicable billing cycles:

Name (please print):	APA ID # (from front page):
Signature:	Date: <span style="float: right;">Daytime Phone #:</span>

I authorize the American Planning Association to deduct from my bank checking or savings account (listed below) monthly payments for my membership and services during the applicable billing cycles.

Name of Bank (U.S. banks only):	Branch:	
City:	State:	ZIP:
9 Digit Routing / Transit Number:	Bank Account Number:	
Account Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> A copy of my voided check is attached.		

I authorize the American Planning Association to charge my credit card (listed below) in monthly installments for my membership and services during the applicable billing cycles.

<input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> American Express	
Card Number:	Exp. Date
Cardholder Signature:	

**Return Direct Debit Application (not payments) to:** American Planning Association, 122 S. Michigan Avenue, Suite 1600, Chicago, IL 60603.  
 Attn: Billings Department. **Fax to:** 312-786-6735. **Questions?** E-mail [billings@planning.org](mailto:billings@planning.org) or call 312.786.6733.