

CELL PHONE \_\_\_\_\_

CLASS \_\_\_\_\_

Last name on account

Garden City Dance Studio

2018-2019

**AUTOMATIC CHARGE**

**\*\*All accounts MUST have a credit card on file**

I give Garden City Dance Studio, Inc. permission to charge my CREDIT CARD on file on the 1<sup>ST</sup> of each month for all 8 payments described in the payment schedule.

You may make your payment in either Cash or Check the week prior to the 1<sup>st</sup> of each month. Please note, if your payment is not made by the 1<sup>st</sup> of each month, we will process your payment to the card on file automatically.

**THERE IS A \$30.00 FEE FOR ALL CARDS THAT ARE DECLINED AND NOT PAID WITHIN 24 HOURS OF THE 1<sup>ST</sup> OF EACH MONTH.** Please keep your card information updated to avoid this fee.

**Stop recurring charges to your card:**

**IT IS YOUR RESPONSIBILITY TO INFORM US WHEN YOUR CHILD WILL NO LONGER BE ATTENDING CLASSES. YOUR CARD WILL BE CHARGED EACH MONTH UNTIL FORMAL NOTICE IS GIVEN IN WRITING VIA EMAIL TO Gardencitydancestudio@aol.com. YOUR TUITION PAYMENTS WILL BE HALTED ONCE WE RECEIVE YOUR WITHDRAWAL IN WRITING. THERE ARE ABSOLUTELY NO REFUNDS FOR TUITION UNDER ANY CIRCUMSTANCES.**

Student's name \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Debit \_\_\_\_\_ Mastercard \_\_\_\_\_ Visa \_\_\_\_\_ Discover \_\_\_\_\_ American Express \_\_\_\_\_

Tuition Amount \_\_\_\_\_ Costume Deposit \_\_\_\_\_ Costume Balance \_\_\_\_\_

Card number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiration date: \_\_\_\_\_ / \_\_\_\_\_ Security code \_\_\_\_\_

Billing zip code \_\_\_\_\_ Copy of Credit card below: