



58485 Pearl Acres Rd
Slidell, LA 70461
(985) 646-0171

Recurring Payment Authorization Form

Payments for Tuition, Costume Fees and Recital Fees will be scheduled to be automatically deducted from your bank account, or charged to your Visa, MasterCard, American Express or Discover Card.

Student(s) Name: _____

Tuition: \$_____ per month Costume Fee Total: \$_____ Recital Fee: \$_____

Please complete the information below:

I _____ authorize Creative Dance LLC to charge my bank account or credit card designated on this form, for the fees listed above. Tuition will be debited on the 5th day of each month beginning August 10, 2015, ending May 2016. 1/2 of total Costume fee will be debited on September 21, 2015. The balance of the costume fee will be debited on October 19, 2015. Recital fees will be debited on March 7, 2016.

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Checking/ Savings Account

OR

Debit Card/Credit Card

Form for Checking/Savings Account with fields for Name on Acct, Bank Name, Account Number, Bank Routing #, Bank City/State, and a routing number illustration.

Form for Debit Card/Credit Card with fields for Card type (Visa, MasterCard, Amex, Discover), Cardholder Name, Card #, Exp. Date, Security Code, and Billing Zip Code.

I understand that this authorization will remain in effect until the designated expiration date or until I cancel it in writing. I agree to notify Creative Dance LLC in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date.

SIGNATURE _____

DATE _____

