



Dance Technics AutoPay Form



Dance Year _____

Students Name: _____ **Parent(s) Name** _____

Students Date of Birth: _____

Mailing Address:

Street: _____

City or Town: _____ **Zip:** _____

Phone: _____

Email: _____

Credit Card Payments (please circle):

MasterCard Visa Discover AMEX

Credit Card number: _____ **Exp.** _____ **3 digit on back:** _____

Check Payments

Bank Routing Number: _____ **Checking account number:** _____

I hereby authorize Dance Technics to automatically deduct my monthly tuition on the 1st of each month from (enter start date) _____ 2010 to June 2011. I am also allowing Dance Technics to deduct my costume deposit(s) of \$32.50 per costume on October 15th, 2010 and the costume balance(s) of \$32.50 per costume on November 29th, 2010.

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AutoPay return check fee/credit card decline fee: \$15.00` *No refunds*

Signature: _____ **Date:** _____