

Bank Transfer Authorization Form

I authorize Dance Center and School of Performing Arts to electronically debit my bank account according to the terms outlined below. I acknowledge that electronic debits against my account must comply with United States law.

Choose one:

) I like auto draft, please draft on the 1st of the month. Extra fees such as costumes and recital fee will not automatically be charged.

) I prefer to pay via emailed invoice (checking acct. payment), check or cash. Please use this as a back up for payment if tuition is not paid by the 8th.

I agree that tuition in the amount of \$_____ can be charged to my account. I understand that if my payment does not go through, I agree to pay a \$25 NSF Fee. I further agree and understand that all fees including Tuition, Costumes, Recital Fees and Video Fees must be paid in full before my child can participate in the recital.

Customer Bank Account Information:

Routing Number		Account number	
Account type:	\bigcirc Checking	O Savings	
Classes at Dance Cent	er and School of	will remain in effect. Performing Arts are year round. ancel classes and payments.	

Custome Signature

Printed Name

Date

Student Name

Classes Attending

Cell Phone Number