

STEP IT UP DANCE COOPERATIVE LIMITED PAYMENT PLAN AGREEMENT

Parent Name (s):	_
Dancer Name (s):	
Address:	
Email:	
Phone Number:	

I, the undersigned, agree to make payments on the specified dates and the agreed amounts stated on the payment schedule below to Step It Up Dance Cooperative LTD. I understand the consequences of not adhering to this agreement could include my dancer(s) not being allowed to participate in competitions, year-end recital, and/or club activities, as well as not being able to register my dancer in future years and/or my account being turned over to a collection agency.

Note that this plan does not include the cost of costumes. These fees are added to accounts once all costumes arrive. Costume fees must be paid in full before costumes are sent home.

Total Amount Owed (beginning balance)

\$_____

Payment Date	Payment Amount	Balance	
September 2025			
October 1, 2025			
November 1, 2025			
December 1, 2025			
January 1, 2026			
February 1, 2026			
March 1, 2026			
April 1, 2026			

I agree that the above schedule of payments is an acceptable resolution to help retire my debt with Step It Up Dance Cooperative Ltd and that the balance will be paid in full on April 1st, 2026. Each payment will have on it marked as tuition in notes to have it easily distinguished as such.

Parent Signature _____

Date	

Step it Up Dance Treasurer _____

Date _____