



2018-2019 Payment Authorization Form

E-check

Customer Name	
Bank Routing Number	
Customer Phone Number	
Bank Accounting Number	

Debit/Credit Card

Credit Card Number	
Expiration Date	
Name on Card	
Billing Address	
Billing Zip code	

Name of Student(s): _____

Studio Location: _____

I understand and I agree to let Almost Famous Dance Studio electronically debit my bank account or create and process a demand draft against my bank account. Monthly tuition will come out the 1st of every month August-May. Additional purchases will be charged to my account per my request.

Signature

Date