

Miss Heather's School of Dance
Credit Card/Automatic Withdraw Form 2018/2019 Season

Student Name: _____

Card Holder Name: _____

Card Holder Address if different than address listed on Registration form:

Credit Card Information: ___ Visa ___ MasterCard ___ Discover

Card Number: _____ - _____ - _____ - _____

Expiration Month/Year: _____/_____

Three Digit# (from back of card): _____

Cardholder Signature: _____

Would you like automatic withdraw: ___ Yes ___ No

Amount: \$ _____

Driver's License Number: _____

State: _____

If signing up for Automatic Withdraw you are agreeing to the amount listed above that will be taken out monthly. If there are any changes in credit card info, amount, withdrawing from studio we would need all these changes in writing. You will be held to a two week change notice just as we have a two week drop notice listed in our Student Guide. You are agreeing to the fact that if a card does not go through the day we run it than we will try to call you once. If we do not receive a call back in a timely matter then you will be charged the regular rate and it will need to be done via check or cash or you will need to give the person who is working the day you call your credit card info again. If we don't hear from you before the 15th of the month than you will also receive a \$10.00 late fee and a statement will be sent to your house.

_____ I agree to the above:

Signature: _____

_____ Please check mark the below if you would like your costume fees taken out via this credit card with November's payment. _____ (Initial)

_____ Please check mark the below if you would like your recital fees taken out via this credit card with February's payment. _____ (Initial)