

Credit Card Authorization

Please charge my credit card:
annually _____ monthly _____

Please continue to use my credit card
that expires on _____

Signature _____ Date _____

New Credit Card information:

I _____ hereby authorize Joanne Brown Dancers to charge my _____ visa

_____ MasterCard on the 3rd day of each month, for monthly tuition for _____
Dancer(s) first and last name

I understand if the 3rd falls on Sat or Sun my account will be debited on the 1st business day following Sunday.

I also authorize additional debit on the 12th of the month for other dance related expenses including, but not limited to costumes, dancewear, recital and other fees.

Visa Number _____ Exp Date _____

MasterCard Number _____ Exp Date _____

Security Code (The last 3 digits found on the back of your card) _____

Address of Card if it is different than what you put on the registration form:

I understand that Joanne Brown Dancers will withdraw funds directly from my bank account as indicated above. I understand that these payments will continue until the conclusion of classes. I understand that if I wish to discontinue payment due to ending classes early or need to change my account information, I can do so by requesting a change form or writing a letter indicating the change. I further understand that a \$20.00 processing fee will be added to my account if funds are unavailable, and I may be subject to a late fee.

Signature: _____ Date: _____