



DANCE STUDIO, LLC
 www.rnsdancestudio.com
 945 Cromwell Avenue, Rocky Hill, CT ~ 860.257.8673

2011-2012 PAYMENT AUTHORIZATION FORM

Enrolled Dancer Name(s) _____

Please note that the billing address of below accounts MUST match the address on the student registration form. ALL payments returned or denied for any reason will result in a \$30 returned payment fee

Please circle tuition plan: **A** (1 payment) **B** (4 payments) **C** (8 payments)

ELECTRONIC FUNDS TRANSFER:

I hereby authorize Rhythm -N- Sync Dance Studio, LLC to debit my checking account at the financial institution listed below according to the payment schedule.

Bank Name: _____ Name of account holder (print): _____

Routing number (9 digits at bottom of your check or deposit slip): _____

Account number: _____ Signature of account holder: _____

For Electronic Funds Transfer: Please return this form with a voided check attached.



CREDIT CARD PAYMENTS:

Please refrain from using your debit card as a credit card; instead please provide checking account information and fill out the EFT section above.

I hereby authorize Rhythm -N- Sync Dance Studio, LLC to withdraw funds from my _____ MasterCard (or) _____ Visa according to the payment schedule above.

Name as it appears on the card (print): _____

Account number: _____ Expiration date: _____

Signature: _____

Rhythm-N-Sync Dance Studio, LLC Payment Agreement

*I agree to be responsible for payment of full tuition for all classes reserved by Enrollee for the 2011-2012 dance season; which runs September 2011-May 2012 whether the Enrollee attends class(s) or not, unless I notify IN WRITING and IN ADVANCE by the 10th of the month. I have chosen a payment plan and understand when registration fee, tuition, costume deposits, costume balances, dancewear purchases, recital tickets, and any incidentals are due. I understand that there are **NO REFUNDS** on registration fees, costume deposits, costume balances, or tuition which have been paid prior to above mentioned withdrawal. That withdrawal in writing only releases me from future tuition payments due when received by the 10th of the month. I understand that Rhythm-N-Sync Dance Studio, LLC's billing cycle is the 15th of the month. All accounts with a balance on the 15th will be automatically withdrawn from the above authorized method.*

I understand that all payments returned or denied will be assessed a \$30 returned payment fee. I understand that if my account is over 30 days past due, I/my child will not be allowed to participate in class until said account is brought up to date. I also understand that if my account is not paid in full before recital performances, I/my child will not be allowed to perform in the show.

Signature: _____ Date: _____