Charlee’s Elite School of Dance

Credit Card/Debit Card Billing Authorization Form

Valid from: July 15, 2023-July 15, 2024

Starting September 1st, 2021, there will be a 4% convenience fee every time we run a card on file.

 DANCER’S NAME­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CARDHOLDER NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CREDIT CARD TYPE (circle one) MASTERCARD VISA DISCOVER AMEX

CREDIT OR DEBIT CREDIT (circle one)

DEBIT CARD NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EXPIRATION DATE\_\_\_\_\_\_\_\_\_\_\_ CVC CODE\_\_\_\_\_\_\_\_ EMAIL ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BILLING ZIP CODE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Check all that apply for the dance season 2023-24:

\_\_\_\_\_\_ Please charge monthly tuition, including Elite Edge monthly tuition and Elite Edge monthly fees, if applicable, of $\_\_\_\_\_\_\_\_\_\_\_\_, on the 1st of the month.

 \_\_\_\_\_\_ Please charge technique costume payments as they come due.

 \_\_\_\_\_\_ Please charge private lesson charges as they come due.

 \_\_\_\_\_\_ Please charge any fees that can be paid by credit card as they are due.

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I agree that all the information above is accurate and complete. I acknowledge that I need to provide a written request to cancel this operation. In the event the credit card payment is declined, there will be a $25.00 ($26.50 with tax) service fee added to my account. I understand I will be e-mailed any notices of declined transactions and it is my responsibility to follow up within due dates of payments or be charged the late fees associated with the invoice. I will report any changes in the above information in person or via e-mail to charleeseliteschoolofdance@gmail.com. Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_

 For office use only:

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