

## Electronic Funds Transfer (EFT) Payment Registration Form

I hereby authorize A Dance Place to debit my \_\_\_ checking \_\_\_ savings account at the financial institution listed below for my monthly tuition payment in the amount specified below:

Bank Name: \_\_\_\_\_

Routing number: (9 digits on the bottom of your check or deposit slip):

\_\_\_\_\_

Account number: \_\_\_\_\_

Name of account holder (PRINT) \_\_\_\_\_

Monthly tuition amount: \_\_\_\_\_ Draft Day of Month: 1<sup>st</sup>

Date of first payment: September 1, 2008

I understand that A Dance Place will withdraw funds directly from my bank account as indicated above. I understand that these payments will continue at the monthly tuition amount through May 31, 2009, and then at ½ the Monthly tuition amount for classes held June 1 through June 13, 2008. I understand that if I wish to discontinue payment due to withdrawal from classes, I must notify Farrah Dobbins, Director of A Dance Place, at (970) 590-9530 or [farrah@adanceplace.com](mailto:farrah@adanceplace.com) by the 25<sup>th</sup> of the month prior to the month in which I wish to withdraw. I understand that I may only withdraw from classes at the end of the month and if I withdraw past the 1<sup>st</sup> of the month, I will pay for that month. I further understand that if I need to change my account information, I can do so by contacting Farrah Dobbins, Director of A Dance Place, at (970) 590-9530 or [farrah@adanceplace.com](mailto:farrah@adanceplace.com). Lastly, I agree to pay a \$5.00 NSF fee if funds are not available at the time of the EFT transaction.

Student(s) Name: \_\_\_\_\_

Parent Name (Please Print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***Please attach a voided check and return with this form.***