

432 E. Foothill Blvd. San Dimas, CA 91773 909.599.1111

Credit Card Payment Authorization Form

Sign and complete this form to authorize **ENCORE DANCE CENTRE** to make a monthly debit to your credit card listed below for tuition services.

By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for monthly transaction only and does not provide authorization for any additional unrelated debits or credits to your account.

(full name)	authorize ENCORE DANCE CENTRE to charge my credit card	
	on the 28 th of every month. Late fee may apply for decli	ined charges.
This payment is for: Dance classes fo	or (name of Encore student)	
	,	
Billing Address	Phone#	
City, State, Zip	Email	
Account Type: Visa	MasterCard Other	
Cardholder Name		
Account Number		
Expiration Date		
	sa/MC, 4 digits on front of AMEX)	

I authorize Encore Dance Centre to charge the credit card indicated on this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for monthly use. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form. I am responsible to maintain a current credit/debit card on file to avoid late charges due to expired dates, insufficient funds or cards that have been deactivated for any reason. Encore should be notified prior to the 1st of each month for an updated authorization form. A late fee for an inactive or insufficient funds is \$15.00