

AUTOMATIC CREDIT PAYMENTS

AUTHORIZATION AGREEMENT FOR PRE-ARRANGED PAYMENTS

I, the undersigned participant in a pre-arranged payment plan, hereby authorize Tricia Sloan Dance Center, LLC to initiate credit card charges in the amount of \$(see attached payment schedule) to my credit card account indicated below.

This authority is to remain in full effect until the Tricia Sloan Dance Center has received written notification from me of its termination in such time and in such manner as to afford the Tricia Sloan Dance Center a reasonable opportunity to act on it.

PARTICIPANT INFORMATION

NAME: _____
Please type or print

BY: _____
Participant's Signature

DATE: _____

Phone #: _____

CREDIT CARD ACCOUNT INFORMATION

Indicate Card Type: VISA MasterCard AmEx Discover

Account #: _____

Expiration Date (mm/yy): _____

Zip Code: _____

COMPANY INFORMATION

Company Name: Tricia Sloan Dance Center, LLC

Signature of Company Representative: _____