

FAMILY FINANCIAL FORM

Responsible Party Information

FIRST NAME LAST NAME SSN or Driver License # (required)

STREET ADDRESS CITY ZIP CODE

I agree to pay monthly tuition to Jenny's Dance Dynamics on the first class of each month. I also agree to the terms of the costume fees and any and all other fees that are associated with my child participating in a Dance/Tumbling program at Jenny's Dance Dynamics. I also agree to pay a \$25 late fee in the event that I am late with my tuition payment and or any other fee. My payment is considered late when it is past the 15th day of the month in which it is due.

In the event that I receive 2 late fees, I agree to put a credit card on file with Jenny's Dance Dynamics to be charged if I am late with any and all payments again.

I agree to the terms that any balance that is past due 90 days or more will be sent to collections, unless prior arrangements for payments have been made.

Signature

Date

All information provided on this form is stored in a secure place, and is only available to the staff of Jenny's Dance Dynamics. Jenny's Dance Dynamics does not share any information.

PLEASE FILL OUT BOTTOM SECTION IF OPTING FOR AUTOMATIC PAYMENT

Automatic Payment Authorization

FIRST NAME LAST NAME

STREET ADDRESS CITY ZIP CODE

HOME PHONE CELL PHONE

I authorize Jenny's Dance Dynamics, LLC to automatically charge my debit/credit card in the amount of \$_____ for monthly tuition.

- I would like to have my tuition charged on the (please circle one) 1st 5th 15th day of each month beginning _____ and continuing until _____. If no date is selected the default date is the 1st day of each month beginning in _____ and continuing until _____.
- If for any reason my tuition changes, it is my responsibility to contact the office to sign a new authorization form with my new tuition amount.

Credit Card Number _____ Visa - MasterCard - Discover

Expiration Date _____ Security Code _____

Signature

Date

Print Name on Card

Date

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