CELL PHONE			Last name on account
PARENTS NAME			
CLASS			
	Garden City Da 2021-202		
I give Garden City Dance Studio, I month. I agree to all terms as stated			
Please make sure your debit card had declined, you will be contacted from payment in order to avoid a \$30.00 f	n someone in our offic		•
You may make your payment with opayment will be processed automat		-	•
Stop recur	ring charges to yo	ur card for w	vithdrawal.
each month until formal notice is given payments will be halted once we have under any circumstances. Drop out for the search month until formal notice is given payments will be halted once we have under any circumstances.	ve in writing via email t e received your email w	o Gardencityda ithdrawal. Ther s except those	classes. Your account will be charged ncestudio@gmail.com. Your tuition re are absolutely no refunds for tuition who have paid in full at registration. I rop out fee per student.
Student's name			
Card holders signature	Print name		
Debit Mastercard	Visa	Discover	American Express
Tuition Amount	Costume Depo	Costume DepositCostume Balance	
Card number:			

Expiration date: _____ Security code _____ Billing Zip Code_____ Copy of Credit card below: