



AUTOMATIC ELECTRONIC PAYMENT AUTHORIZATION FORM: IDOL of Miami, LLC & IDOL Academy, LLC

We are excited to offer the safety, convenience and ease of IClassPro®—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

AUTOMATIC ELECTRONIC PAYMENT AUTHORIZATION FORM POLICIES

I (we) hereby authorize IDOL OF MIAMI, LLC and/or IDOL ACADEMY, LLC to initiate credit card charges to the below-referenced credit card account (**Section A**) OR, initiate debit entries to my (our) checking or savings account, indicated below (**Section B**). I (we) understand that at the IDOL Academy there are two types of charges, monthly charges and weekly charges. I understand that monthly charges are ran on the 1st of every month and weekly charges are ran at 12pm on the Thursday before the week that the service begins.

CANCELLATION POLICY: To properly affect the cancellation of this agreement for **MONTHLY CHARGES**, I (we) are required to send an email request by the 28th of every month. To properly affect the cancellation of this agreement for **WEEKLY CHARGES**, I (we) are required to send an email request before 12 pm on the Thursday before the week that the service is provided. I understand that if I miss the above deadlines the charges will not be refunded nor credited.

By signing this document I acknowledge that I have read and understand the policies of this Automatic Electronic Payment Authorization Form as well as the cancellation policies.

Print Name: _____ Signature: _____ Date: _____

Name of child(ren) participating in our programs: _____

COMPLETE ONE SECTION ONLY

SECTION A (Credit Card / Debit Card)

Cardholder Name	Phone #		
Cardholder Address	City	State	Zip
Credit Card Number	Expiration Date	(CVV 3 digits on back)	
Cardholder Signature	Date		

SECTION B (Bank Account)

Your Name	Phone #		
Address	City	State	Zip
Bank or Credit Union Name	Bank or Credit Union Address	City	State Zip
Routing Transit Number (see sample below)	Account Number (see sample below)	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings

Authorized Signature _____ Date _____

For Official Use Only

Date Received
Employee Signature

ATTACH VOIDED CHECK HERE

