

## Billing Information and Authorization Form

## **MONTHLY AUTO-DEBIT**

| CREDIT CARD INFORMATION AND AUTHORIZATION                                                                                                              |                  |                  |                   |                                      |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------|-------------------|--------------------------------------|--|
| NAME ON CREDIT CARD                                                                                                                                    |                  | Email            |                   | 5-digit zip code                     |  |
| Credit Card type (circle)                                                                                                                              | VISA             | MASTERCARD       | DISCOVE           | R AMEX                               |  |
| Card Number                                                                                                                                            |                  | E                | Ēxp. date         | Code                                 |  |
| Please note: Your first payment will include the yearly registration fee of \$ for a total of: \$                                                      |                  |                  |                   |                                      |  |
| After that, your card will be billed in monthly installments on the 23rd of each month (in advance) in the amount of  \$ toward your semester invoice. |                  |                  |                   |                                      |  |
| I hereby authorize <b>Musical N</b>                                                                                                                    | linds Conservate | ory of Winderme  | re, LLC to charge | my credit card on file. I understand |  |
| the Conservatory will be billing on a monthly basis and I agree to pay according to the terms of the creditor and the                                  |                  |                  |                   |                                      |  |
| contract I have signed for mu                                                                                                                          | ısic lessons.    |                  |                   |                                      |  |
| Signature of cardholder                                                                                                                                |                  | Date             |                   |                                      |  |
| FULL SEMESTER PAYMENT                                                                                                                                  |                  |                  |                   |                                      |  |
| FULL SEMESTER TUITION                                                                                                                                  |                  |                  |                   |                                      |  |
| Student paid Full Semester Tuition                                                                                                                     |                  | ester 1- FALL    | Total amount: \$  | Total amount: \$                     |  |
|                                                                                                                                                        | Sem              | nester 2- SPRING | Total amount \$   |                                      |  |
|                                                                                                                                                        | SUM              | IMER TERM        | Total amount \$   |                                      |  |
| Method of payment:                                                                                                                                     | Personal C       | heck Credi       | t Card            | Cash payee initial                   |  |
| (please circle)                                                                                                                                        |                  |                  |                   | office initial                       |  |