

Mastercard/Visa/Discover Authorization Form - 2017-18

I hereby authorize the use of the listed credit/debit card information by Iowa Ballet Academy for the payment of monthly tuition and any other automatic charges selected below on each fee's associated due date.

Please mark all that you would like to authorize for automatic payment:

- Monthly tuition
- Monthly competition team fee
- Competition entry fees
- Concert fee
- Costume fees
- Private lesson fees

Card Information:

- Discover
- Mastercard
- Visa

Card Number: _____ - _____ - _____ - _____

Expiration Date: _____

Please **PRINT** name as it appears on the card: _____

Address: _____

Phone Number: _____

Card User Signature, authorizing the above automatic charges as they come due:
