

Jensen's Yamaha Music School Automatic Credit Card Billing and One-Time Credit Card Payment Authorization Form

You may use this form for a one-time credit card payment. If you would like to enjoy the convenience of automatic billing, simply complete and sign this authorization form. **All requested information is required unless indicated as optional.** Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us.

Customer Information

Customer name:

Home Phone:

e-mail address (optional):

Work or Wireless Phone (optional):

Payment Information

CHOOSE ONE (ONE-TIME or ACCB)

I. I authorize Jensen's Yamaha Music School to bill the card listed below **ONE-TIME** for the following amount:

\$ _____

II. **Automatic Credit Card Billing (ACCB)**

A. I authorize Jensen's Yamaha Music School to bring my account current by billing the card listed below a one-time charge/credit equal to my outstanding balance as of the day the automatic billing is established.

B. I authorize Jensen's Yamaha Music School to automatically bill the card listed below as specified.

Amount: \$ _____ (leave blank for "full tuition less applicable discounts")

Frequency (check one): Monthly Quarterly Semi-Annually Annually

Start billing on: ____/____/____ End billing when: Contract expires: ____/____/____
(1st of the month. Blank for ASAP) Customer provides written cancellation (default)

C. I elect the following option for payment of invoices for books, materials, etc (check one):

I authorize Jensen's Yamaha Music School to bill the card listed below the full amount of any future invoices for books, materials, etc. I understand that this charge will be made approximately 10 days after the invoice date (default).

I will pay any invoices for books, materials, etc. upon receipt.

Credit Card Information

Jensen's Yamaha Music School accepts **Discover, Visa, MasterCard, and American Express.**

Credit card type:

Credit card number:

Expires:

Cardholder's name:

Cardholder's Zip code:

(as shown on credit card)

(from credit card billing address)

Customer's signature:

Date:

_____ / _____ / _____