



Bank Transfer Authorization Form

I authorize **Jensen's Yamaha Music School** to electronically debit my bank account according to the terms outlined below. I acknowledge that electronic debits against my account must comply with United States law.

Terms of billing:

One time on _____ for the amount of \$_____.
mm/dd/yy

Starting on _____ and on the _____ of each month through
mm/dd/yy day of the month (#)

_____ for the amount of \$_____.
mm/dd/yy

Starting on _____ for the amount of \$_____ and accordingly thereafter
mm/dd/yy

per the terms in invoice(s) _____.

Customer bank account information:

Routing number

Account number

Account type : Checking Savings Consumer Business

Phone Number

This payment authorization is to remain in effect until I, _____, notify
Customer Name

Jensen's Yamaha Music School of its cancellation by giving written notice in enough time for the business and receiving financial institution to have a reasonable opportunity to act on it.

Customer signature

Customer printed name

mm/dd/yy