

**Jensen's Yamaha Music School**  
**Automatic and One-Time Credit Card/Bank Transfer Authorization Form**

Customer Name : \_\_\_\_\_ Phone : \_\_\_\_\_

Email address : \_\_\_\_\_

**Monthly Recurring Payments Information**

Debit/Charge every month on this date : \_\_\_\_\_ Tuition Payment Amount : \$ \_\_\_\_\_  
(select day 1-28)

Start billing on : \_\_\_\_/\_\_\_\_/20 \_\_\_\_\_ End billing when :  Customer provides written cancellation (default)  
(blank for ASAP)  Other \_\_\_\_\_

- Debit/charge future invoices for books, materials, etc. I understand that this debit/charge will be made approximately 7 days after the invoice date (default)
- I will pay any invoices for books, materials, etc. upon receipt. I understand that I will be subject to a late fee of \$20 if payment is not received within 10 days of invoice date.

**Optional One-Time Payment (process now)**

- Registration fee \$50
- Family registration fee (2+students) \$85
- Books and materials received \$ \_\_\_\_\_

**I authorize Jensen's Yamaha Music School to (choose one):**

- electronically debit my bank account according to the terms above. I understand that electronic debits against my account must comply with United States law.

\_\_\_\_\_  
Routing number

\_\_\_\_\_  
Account Number

Account type :  Consumer Checking  Consumer Savings  Business Checking  Business Savings

- charge my credit card according the terms above

**Card Type**

MasterCard

\_\_\_\_\_  
Cardholder (Name on card)

Visa

Discover

\_\_\_\_\_  
Card number

AMEX

\_\_\_\_\_/\_\_\_\_\_/20 \_\_\_\_\_  
Expiration Date (MM/YYYY) CVW Code Zip Code (billing address)

*This payment authorization is to remain in effect until I notify 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 : \_\_\_\_\_ Date : \_\_\_\_\_