

**Bank Authorization Agreement For Automatic Debit 2018/2019**

I (we) hereby authorize **MISS KRISTIN'S DANCE STUDIO**, to initiate debit entries to my (our) \_\_\_\_\_ **Checking** or \_\_\_\_\_ **Savings** **account** (select one) indicated below in payment of **Monthly Tuition**.

I also authorize debits for the following:

BANK  
NAME \_\_\_\_\_

TRANSIT/ABA NO (routing number). \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_ on the 1<sup>st</sup> of Each month.

This authority is to remain in full force and effect until Miss Kristin's Dance Studio has received written notification from me (or either of us) of its termination.

ACCOUNT  
NAME(S) \_\_\_\_\_

STUDENT  
NAME(S) \_\_\_\_\_  
(Please Print)

DATE \_\_\_\_\_ SIGNED X \_\_\_\_\_ SIGNED X \_\_\_\_\_

**Important Notice: A 30 day notice will be required to stop all debits.**