

As a duly authorized signer on the financial account identified below, I authorize Sound of Light Music Academy to perform electronic funds transfers from this account for payments due according to the policies below.

INITIAL PAYMENT

Transaction Date: _____
Total Amount: \$30 x ___ weeks = _____

RECURRING PAYMENT

Transaction date: the 24th of each month, until canceled**
Amount: \$30 per week, paid monthly*

*Tuition is paid monthly, in full and in advance, for the reservation of a regular weekly lesson time. No refund or credit can be given for lessons cancelled by the student or authorizing payor. Tuition will be credited or refunded per lesson only for teacher cancellations, and for these closures: Memorial Day weekend, Fourth of July weekend, Labor Day weekend, Thanksgiving weekend, Christmas Eve, Christmas Day, New Year's Eve and New Year's Day.

** Notice of lesson discontinuation must be communicated via email with no less than 3 business days prior to the 24th of the month. Sound of Light Music Academy reserves the right to discontinue ongoing lessons at any time and for any reason. In the case where this occurs, any classes remaining in the month that were already paid for will be refunded to the payor, and no future payments will be processed until re-authorized by the payor.

PRINTED NAME**E-MAIL ADDRESS**

AUTHORIZING SIGNATURE**DATE**

FINANCIAL ACCOUNT INFORMATION**Card Number**

Exp. Date**CVV** (3-digit security code)**Zip Code**

PLEASE NOTE: Sound of Light Music Academy applies a 2.9% convenience fee to all credit card payments.