

**Emily Finch, LLC, doing business as Dance 101**  
**1855 E. Guadalupe Rd. Suite 101 - Tempe, AZ 85283**  
**480.839-4952**

***Credit Card Authorization Agreement***  
***Recurring Monthly Payments***

Visa                      MasterCard                      Discover

Cardholder Name as Shown: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Billing Address:  
Street: \_\_\_\_\_

City, State Zip Code: \_\_\_\_\_

Initial Payment on: \_\_\_\_\_ (date) for: \$\_\_\_\_\_

Recurring:  
\$\_\_\_\_\_ beginning the 1<sup>st</sup> of \_\_\_\_\_ for \_\_\_\_\_ monthly payments

In consideration of the goods, products and/or services provided to me by Emily Finch, LLC, doing business as Dance 101 (the "Studio"), as listed above, I hereby authorize the Studio to charge my credit card as indicated here, including, if necessary, adjustments for any changes to my account, e.g. an NSF fee of \$25 and a \$15 late fee for payments received after the 5th day of any given month. This authorization will remain in full force and effect until Studio has received written notification from me of its termination in such time and such manner as to afford Studio a reasonable opportunity to act on it. I understand that I may only revoke this authorization by providing Studio a 30-day prior written notice Withdrawal Form at the address listed above. I also agree that I will not dispute any charges with my credit card company without first making a good faith effort to resolve the situation with Studio directly. I guarantee and warrant that I am the legal cardholder and that I am legally authorized to enter into this agreement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Date