

Summer 2025 Credit Card Authorization Form

Kindly print the following information below and submit it to the office to finalize your dancer's summer registration.

Name on Account: _____ Student Name(s): _____



(Circle One)

Name on Credit Card _____

Credit Card # _____ Expiration Date ____/____/____ Security Code _____

Address _____

City _____ State _____ Zip _____

***Credit Cards ONLY – NO Debit Cards will be accepted for payments.**

I understand that if I wish to discontinue this method of payment, I must notify the office by the 1st of the month with my new payment authorization. Failure to notify will result in the continuation of processing my current credit card summer tuition payment. It is my responsibility as the customer to ensure that my credit card information is current and updated at all times. I authorize Southern Dance Theatre to process an electronic debit from my credit card, plus the additional 4% processing fee.

Please Check All That Apply:

Registration Fee:

_____ \$20.80 - Single Student _____ \$31.20 - Family _____ \$10.40 - Adult Student

Rising Stars Dance Camp _____ 1 Payment in Full \$280.80 _____ 3 Payments of \$93.60 on April 10, May 10 and June 10
Shooting Stars Dance Camp _____ 1 Payment in Full \$561.60 _____ 3 Payments of \$187.20 on April 10, May 10 and June 10
Shining Stars Dance Camp _____ 1 Payment in Full \$702.00 _____ 3 Payments of \$234.00 on April 10, May 10 and June 10

Number of 1 Hour Classes _____

1 Hour Class (5 classes) _____ 1 Payment in Full \$119.60 _____ 3 Equal Payments on April 10, May 10 and June 10

Number of 1.5 Hour Classes _____

1.5 Hour Class (5 classes) _____ 1 Payment in Full \$179.40 _____ 3 Equal Payments on April 10, May 10 and June 10

Number of 2 Hour Classes _____

2 Hour Class (5 classes) _____ 1 Payment in Full \$239.20 _____ 3 Equal Payments on April 10, May 10 and June 10

Adult Classes - Ages 18+ _____ 1 Hr Class \$31.20 _____ 5 - 1 Hr Classes \$130.00

Male or Alumni Discount _____ 25% OFF

Total Reg. Fee \$ _____ + Tuition \$ _____ = \$ _____ Divided By # of Payments _____ = \$ _____

I have carefully reviewed and comprehended all the content presented in this credit card authorization form. **Initial Here:** _____

Parent Signature: _____ Date: _____