



### EFT Authorization Agreement for Automatic Withdrawals

I (we) authorize Miller's Center Stage Dance Academy, LLC, to initiate monthly debit entries to the checking account shown below. I (we) understand this authorization will continue until Miller's Center Stage Dance Academy, LLC receives my (our) written termination agreement and my (our) depository institution has a reasonable amount of time to act on it. I (we) agree to receive notice of the amount to be withdrawn only when the amount has changed from the previous draft amount by \$5.00 or more. I (we) understand that if a payment is currently due, I (we) am responsible to make that payment using another method and agree to pay the \$30 NSF funds amount should my checking account not have sufficient funds for the automatic withdrawal. This agreement will remain in full force and effect for the 2018-2019 dance session.

Deductions from your checking account will be made each month between the 20<sup>th</sup>-25<sup>th</sup> from the date this form is signed until May, 20, 2019. Each automatic withdrawal will be charged \$0.50 processing fee.

I (we) acknowledge that any transactions authorized by this agreement must comply with the provisions of the U.S. law. This information will be stored in a secured location and will not be given out.

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Your Name(s): \_\_\_\_\_

Your Phone Number: \_\_\_\_\_

Your Bank's Name: \_\_\_\_\_

Your Bank's routing/transit number: \_\_\_\_\_  
*(usually the first nine digits listed on the bottom left corner of your check)*

Your Bank Checking Account Number: \_\_\_\_\_  
*(usually the next set of numbers listed on the bottom of your check)*

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Authorization Signature

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Date