



# REQUIRED PAYMENT CONSENT FORM

PLEASE PRINT CLEARLY

Student's Last Name: \_\_\_\_\_

Student's First Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

**PLEASE NOTE:** A Recital Fee is due in February for our May Recital. Fees are \$25 for each class a student registered for *up to* \$100 per student. If you choose auto withdrawal, the recital fee will come out of your checking account automatically in February. Over the 9 month dance year the class weeks average 4 per month. Monthly charge is based on this average. Tuition is not increased or decreased for short or long months or classes missed due to holidays. Only regularly occurring monthly fees may be paid by automatic withdrawal or credit card. Incidental fees such as T-shirts, dance recital videos, or dance photo fees must be paid by check. Please give the office 10 days notice from the 1st of the month to discontinue these charges for the following month.

**By signing below, I consent to the payment policies and procedures of Festival Dance Academy.**

\_\_\_\_\_  
Parent / Guardian Signature or Participant Signature (if over 18 years)

**Payment Option #1                      Automatic Checking Account Withdrawal Monthly**

\_\_\_\_\_  
Bank Name                                      Branch                                      Transit/ABA No.                                      Account Number

**Payment Option #2                      Pay for Entire Semester or Year with Credit Card**

Visa                       Master Card                       Amount for Full Year \$ \_\_\_\_\_ or Amount for Semester \$ \_\_\_\_\_

\_\_\_\_\_  
Card Number                                      Exp. Date                                      Card Holder Name (PLEASE PRINT)

**Payment Option #3                      Pay monthly by check**

Tuition is DUE on the 1<sup>st</sup> of the month and is LATE after the 5<sup>th</sup>. There will be a \$5 late fee for late payments. Please pay on time.

Signature \_\_\_\_\_                                      Date \_\_\_\_\_

**Help us celebrate 40 years of Dance! Order a T-Shirt for your dancer and family!**

(ask to see a sample at the FDPA office)

**Cost: Child size- \$20    Adult Size-\$25**

**Child Sm: \_\_\_\_\_ Child Md: \_\_\_\_\_ Child Lg: \_\_\_\_\_**

**Ad Sm: \_\_\_\_\_ Ad Md: \_\_\_\_\_ Ad Lg: \_\_\_\_\_ Ad XL: \_\_\_\_\_**

**T-Shirt back option- Dancing since (year): \_\_\_\_\_**

**Total Number of T-Shirts: \_\_\_\_\_ Total Cost: \_\_\_\_\_**



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Payments (For Office Use Only)	
Registration Fee: _____	January: _____
September: _____	February: _____
October: _____	March: _____
November: _____	April: _____
December: _____	May: _____
Recital Fee(s): _____	