

## **Brighter Days Dance Payment Plan Agreement for the 2024-2025 Dance Season**

This payment plan agreement for classes at Brighter Days Dance is made and entered into by Brighter Days Dance Studio and \_\_\_\_\_, whose phone number is \_\_\_\_\_ and whose email is \_\_\_\_\_.

**Total Down payment Paid (must be \$25 per class)** \_\_\_\_\_

**Total Balance Due** \_\_\_\_\_

*Please Fill in the plan information below:*

I, \_\_\_\_\_, plan to pay \_\_\_\_\_ by the last day of the month, every month for \_\_\_\_\_ months, until my total balance due is paid in full.

*\*If you do not receive cash or check by the dates stated above, please charge my credit card. I authorize the payment along with the 4% service fee. **If the credit card is declined, there will be a \$25 processing fee added to my total amount due.***

Card # \_\_\_\_\_

EXP \_\_\_\_\_ CVV \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Card holder signature \_\_\_\_\_

If the unpaid balance is not paid in full by March 14, 2025, my child(ren) will not be able to participate in the fall rehearsal and recital the week of April 6<sup>th</sup>, 2025.

I have read the payment plan agreement. I understand and accept all its terms in full.

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

Brighter Days Dance Signature \_\_\_\_\_ Date \_\_\_\_\_