

220-101 Avondale Ave.
Wilmington, NC 28403
(910) 791-7660
www.SEDAdance.com



2011-2012
AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

I (we) hereby authorize South East Dance Academy, to initiate debit entries to my (our) Checking Account indicted below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Laws.

Depository	
Name _____	Branch _____
City _____	State _____ Zip _____
Routing Number _____	Account Number _____
This authorization is to remain in full force and effect until South East Dance Academy has received written notification from me (or either of us) of its termination in such time and in such manner as to afford South East Dance Academy and DEPOSITORY a reasonable opportunity to act on it.	
Name(s) _____	Student's Name _____
Date _____	Signature _____
NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS <u>MUST</u> PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.	

Email Address: _____

Notes:

Attach A Voided Check

September _____	December _____	March _____
October _____	January _____	April _____
November _____	February _____	May _____

Office Use Only