

I give Community Music School permission to charge the VISA or MasterCard account indicated below for my *monthly* installments - first payment due September 1, 2011; final due May 1, 2012.

1st Student's Name (Please Print) _____

2nd Student's Name (Please Print) _____

Cardholder's Name (Please Print) _____

Cardholder's Signature _____

Card # _____ Expiration Date ____/____

Amount to be billed on the 1st of each month (as indicated on your invoice) \$ _____