

PIANO LESSONS IN YOUR HOME, INC.

Serving Families Since 1996

AUTOMATIC PAYMENT DEBIT OR CREDIT CARD CONSENT FORM

PLEASE PRINT CLEARLY:

Student's Name: _____

Student's Name: _____

Parent's Name: _____
(if different than above)

Phone Number(s): (____) _____ -(____) _____

Email address: _____

I hereby authorize Piano Lessons In Your Home to charge my account in the amount of:

\$ _____ on the first day of each month starting _____, and/or

\$ _____ one time enrollment fee charge on _____ (optional).

I will give the office one month's (30 days) written notice (via mail or email) from the first of the month to discontinue or modify these charges.

Signature

Date

Checking Account # _____

Credit Card # _____

Checking Routing # _____

Credit Card Exp Date _____

Check # attached _____

Circle one: VISA OR MASTER CARD

If you choose the automatic payment from your checking account, please staple a voided check here and we will set up your automatic payment. You will receive a confirmation email from our office when a transaction has been initiated. Please email us at accounting@pianolessonsinyourhome.com if you have any additional questions about our AutoPay system!

Office Use Only:

City/State: _____

Circle one: NC EC WL

1st Month's check number/date: _____

Enroll Fee check number/date: _____

Month Start Date: _____

Lesson Length: _____

Amount Payable: _____ Enroll Fee: _____

Name of Teacher: _____

Teacher's email: _____

Columbus
6497 Proprietors Road
Worthington, OH 43085
(614) 847-1212

Cincinnati/Dayton
5231 Bridle Court
West Chester, OH 45069
Cincinnati (513) 860-3540
Dayton (937) 426-1020

Chicago
4556 N Beacon St Unit 1
Chicago, IL 60640
(847) 492-1833

Tampa Bay
720 Athens St
Dunedin, FL 34698
(727) 734-3888

Dallas
2220 Timberwood
Carrollton, TX 75006
(972) 280-9000

Little Rock
2022 N University
Little Rock, AR 72207
(501) 224-2115

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