



**Payment
Agreement
Form
2026-2027**

Choose your Payment Option:

ACH-Via Checking/Savings account (*preferred payment method*)

Use Account on file

Account Name: _____

Name on Bank Account (if different from above): _____

Bank Name: _____

Bank Routing Number: _____

Circle one: Checking Account or Savings Account

Checking or Savings Account Number: _____

I understand the Monthly Tuition autopayments will come out of my checking/savings account on the 1st of the month or the next processing day if the date occurs on a holiday or weekend. **ACH Tuition Rates:** 3 year old program \$280/month and 4 year old program \$380/month.

Note: A 3% surcharge will be added if a credit/debit card is used to pay the Registration/Supply Fees.

Other Payment Methods(credit/debit card) Use credit/debit card on file

Credit/debit number: _____ Exp date: _____

I understand the Monthly Tuition autopayments will come out of my credit/debit card account on the 1st of each month. **Non-ACH Tuition Rates:** 3 year old program \$300/month and 4 year old program \$400/month.

I do hereby give The Dance Center of Spokane/Creative Minds Bright Minds Preschool permission to set up autopayment for Monthly Tuition as indicated on this Payment Agreement Form.

Signature _____ Date _____