

Inland Empire Gymnastics Academy



Billing Authorization for Tuition

(Preschool/Kinder, Recreational and Tumbling Programs)

Inland Empire Gymnastics Academy requires that all enrolled students have a valid credit card on file with the gym in order to participate in our gymnastics and tumbling program.

I represent and warrant that if I am purchasing something from Inland Empire Gymnastics Academy that (i) any credit or bank account draft (ACH Draft) information I supply is true and complete, (ii) charges incurred by me will be honored by my credit card company or financial institution, and (iii) I will pay the charges incurred by me at the posted prices, including any applicable taxes, fees, and penalties.

I hereby authorize Inland Empire Gymnastics Academy to charge my bank, or credit card, account for the following:

_____ Monthly Tuition

I understand that I must notify Inland Empire Gymnastics Academy by the 25th of the month with an Enrollment Drop Form if I plan to withdraw my student from class. If I fail to complete an Enrollment Drop Form by the 25th, I understand that I am responsible for the following month's tuition payment whether or not my student attends classes.

Should I dispute a charge through my financial institution, this will constitute a breach of contract possibly resulting in, but not limited to, penalties, additional fees, collection, legal action, and/or termination of any, and/or all, current or future services at Inland Empire Gymnastics Academy.

Parent Signature

Date

Office Use Only

Name on Credit Card *(if different from name on student account)*

Billing Address for Credit Card *(if different from address on file at the gym)*

Credit Card Information Entered into Computer

Credit Card Authorization Performed and Successful

DATE: _____ Staff Initials: _____

Inland Empire Gymnastics Academy



Autorización de Facturación para Matrícula

(Preescolar / Kinder, programas recreativos y tumbling)

Inland Empire Gymnastics Academy requiere que todos los estudiantes inscritos tengan una tarjeta de crédito válida en el archivo del gimnasio para poder participar en nuestro programa de gimnasia y volteretas.

Declaro y garantizo que si compro algo de Inland Empire Gymnastics Academy que (i) sera toda cargado a mi cuenta de banco o de crédito (ACH Draft) testifico que toda la informacion es verdadera y completa, (ii) los cargos incurridos por mí serán respetados por mi crédito compañía de tarjetas de crédito o institución financiera, y (iii) pagaré los cargos incurridos por mí a los precios publicados, incluidos los impuestos, tarifas y multas aplicables.

Por la presente autorizo a Inland Empire Gymnastics Academy a cargar en mi cuenta bancaria o tarjeta de crédito lo siguiente:

_____ matrícula mensual

Entiendo que debo notificar a Inland Empire Gymnastics Academy antes del día 25 del mes con un Formulario de Cancelación de Inscripción si planeo retirar a mi estudiante de la clase. Si no completo un Formulario de Abandono de Inscripción antes del 25, entiendo que soy responsable del pago de la matrícula del mes siguiente, ya sea que mi estudiante asista o no a clases.

Si disputara un cargo a través de mi institución financiera, esto constituirá un incumplimiento del contrato que podría resultar en, entre otros, multas, tarifas adicionales, cobro, acción legal y / o terminación de cualquiera y / o todos los servicios actuales o futuros en la Academia de Gimnasia del Inland Empire.

Firma de los padres

Fecha

Office Use Only

Name on Credit Card *(if different from name on student account)*

Billing Address for Credit Card *(if different from address on file at the gym)*

Credit Card Information Entered into Computer

Credit Card Authorization Performed and Successful

DATE: _____ Staff Initials: _____