**Big Picture Gallery & Studio**

**Authorization for Direct Debit**

I (We) hereby authorize **Big Picture Gallery & Studio** (hereinafter called Company) to initiate debit entries to my (our) accounts (s) indicated below on or about the 15th of each month and the depository financial institution named below (hereinafter called Depository) to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with provisions of U.S. law.

**Depository/ Bank Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Routing Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_ Checking Account \_\_\_\_ Savings Account**

This authority is to remain in full force and effect until company has received notification from me (or either of us) of its termination in such time and in such manner as to afford Company and Depository a reasonable opportunity to act on it.

**Name (s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\*By Signing this form I am agreeing to make 8 monthly payments of $48/ ($73 for Advanced Artist Studio) to cover School-year tuition for art classes at Big Picture Gallery & Studio. My child will be permitted to switch to different classes throughout the year, however they are expected to attend class the duration of the school year, with a break in December. Cancellations will be allowed for illness (with a doctor’s note), moving or family emergencies.