

Credit Card Payment

Student Name: _____ Date: _____

Billing Address: _____

City, State: _____ Zip: _____

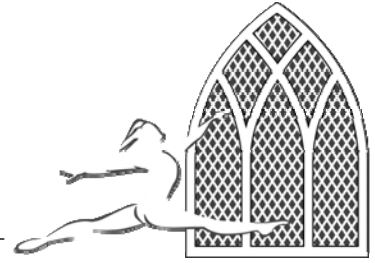
Visa/MC Credit Card #: _____

CVV(3 digit code on back): + _____ Expiration Date: _____

Signature of cardholder: _____

This payment is for: Tuition Dancewear Costume Other (list below)

Place in tuition box at studio or mail to: **PWDA, P.O. Box 417, Nokesville, VA 20182**



**PRINCE WILLIAM
DANCE ACADEMY**