

Name: _____ Country of Residence: _____

MMS Student Number: _____ RM Initiation Level: _____

Please list the classes you are registering for at this program:

Are you paying the (please check one):

Deposit

Balance

Full Amount

PAYMENT INFORMATION By completing this form, you are indicating that you give the Modern Mystery School full permission to process the amount specified on the credit card provided below.

Amount authorized: _____ Credit Card: (Please circle one) VISA MasterCard AmEx

Credit Card Number: _____

Expiry Date: ____/____ CVV (Security code): _____

Signature: _____ Date: _____

PLEASE READ AND INITIAL BESIDE EACH STATEMENT:

_____ Registration is not complete until deposit is paid.

_____ Final and full payment is due no later than **the deadline date indicated on the calendar post**. (Late fees apply.)

_____ Payments are non-refundable and non-transferable for ANY reason.

_____ Classes added or changed at a later date will be subjected to an additional administrative fee of \$50 per class or change to registration.

_____ All information must be filled out in full. Any missing information will delay your registration.