

Calvary Christian School
Authorization Agreement for Automatic Tuition Draft

Banking regulations require that we maintain updated financial information regarding your account. Therefore, **each year**, it is necessary for us to have a ***voided check and authorized signature*** for the account to be drafted.

Payer's Name _____

Parent's Name (if different from Payer) _____

Daytime Phone Number _____

| | | |
|---|-----------------------------------|----------------------------------|
| ** For ACH Bank Account Withdrawals ** <i>(Preferred Method for Monthly Payment)</i> <i>Must attach a <u>voided check</u></i> | | |
| Bank Name _____ | | |
| Bank Routing # _____ | | |
| Bank Account # _____ | <input type="checkbox"/> Checking | <input type="checkbox"/> Savings |

| | | |
|---|--------------------------------------|-----------------------|
| ** For Credit Card Payments ** <i>(Note: There will be a \$ 10 per month administrative fee for Credit Card Payments)</i> | | |
| Name on Card _____ | | |
| Credit Card # _____ | | |
| <input type="checkbox"/> VISA | <input type="checkbox"/> Master Card | Expiration Date _____ |

I (We) hereby authorize Calvary Christian School to withdraw funds from the bank account or credit card listed above on a monthly basis for tuition for the 2010-2011 school year.

Drafts will occur on the **10th of each month.**

I (We) understand that if a payment is missed due to non-sufficient funds or stopped payment, there will be a \$ 25 NSF fee and a \$ 25 late fee assessed.

 Signature (Authorized Signature on Account)

| Monthly Draft Calculation | | |
|---|---------------|----------------|
| Child's Name (Oldest 1 st) | Child's Grade | Monthly Amount |
| 1. | | \$ |
| 2. | | \$ |
| 3. | | \$ |
| 4. | | \$ |
| Total Monthly Tuition | | \$ |
| Administrative Fee for Credit Card Payment | | \$ |
| Facilities Fee Monthly Fee Option | | \$ |
| Total Monthly Draft | | \$ |