**AUTHORIZATION FOR ELECTRONIC (ACH) PAYMENT**

**Name on Bank Account: _____**

*Completion of this form provides Hamblen Park Preschool with a standing authorization to withdraw funds from your financial institution account for the purposes and in the amounts checked below.*

**Check all boxes for which you authorize ACH withdrawal:**

☐ One-time Registration Fee $__50.00__

☐ May 2021 Tuition in the amount of $_____

**For the months September 2020 – April 2021:**

| **For Office Use Only** |
|---|
| Date W/D _____ |
| Date W/D _____ |

☐ Monthly Tuition in the amount of $_____ will be withdrawn on the 8th of each month, **beginning September 8, 2020**.

(If the 8th falls on a weekend or holiday, tuition will be withdrawn on the next business day following the 8th.)

- Attach a voided check or completed form from your financial institution listing your account and routing numbers.
- Any temporary or permanent change to one or more of the payment selections above or bank account information must be communicated in writing, and confirmed by the Preschool, at least 10 business days prior to the next transaction.

**Signed_____Date_____**

**(Continued on Back)**

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**Signed_____Date_____**

**(Continued on Back)**

**Student Name:** _____ _____

**Parent/Guardian Names:** 1_____

2_____

**Parent/Guardian Email(s)** 1 _____

2 _____

**Parent/Guardian Contact Phone(s):** 1_____

2_____

**(Please complete front of form)**

**Student Name:** _____ _____

**Parent/Guardian Names:** 1_____

2_____

**Parent/Guardian Email(s):** 1 _____

2 _____

**Parent/Guardian Contact Phone(s):** 1_____

2_____

**(Please complete front of form)**