

**AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL OF FUNDS**



Student's Name \_\_\_\_\_

Payer's Last Name \_\_\_\_\_

Payer's First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Effective date of authorization: \_\_\_\_\_

Type of authorization:     New authorization  
     Change payment amount

Change banking information  
 Discontinue electronic payments

**Payment Options – check one**

Monthly payments will be withdrawn on the 5th from August through May.  
 (Amounts reflect 5% discount for using the ACH Program.)

- Half-Day Preschool      \$109.25 monthly
- Full-Day Preschool        \$218.50 monthly
- Half-Day Pre-K             \$156.75 monthly
- Full-Day Pre-K             \$285.00 monthly

**OR**

Single payment due by September 1<sup>st</sup> to be withdrawn on

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_.

(Amounts reflect 10% prepayment discount.)

- Half-Day Preschool      \$1,035.00
- Full-Day Preschool        \$2,070.00
- Half-Day Pre-K             \$1,485.00
- Full-Day Pre-K             \$2,700.00

Please debit my donation from my (check one):

- Savings Account (contact your financial institution for Routing #)
- Checking Account (attach a voided check)

Routing Number: \_\_\_\_\_  
*Valid Routing # must start with 0, 1, 2, or 3*

Account Number: \_\_\_\_\_

I authorize Learn-A-Lot Preschool at Turning Point Church to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization. Please note that payments returned by the bank will result in an additional fee, and forfeiture of the 5% discount for that month.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_