

ACH Draft Form / Automatic Tuition Payments

Please take monthly tuition payments from my: ___ Checking Account ___ Savings Account

Parent/Guardian Name: _____

Name as it appears on Checking/Savings Account:

Bank Name: _____

City/State/Zip: _____

Routing #: _____ Account #: _____

(Print Student Name Above) _____
Email Address

I, the undersigned, authorize New Horizons Home School Academy (NHSA) to draft the amount of \$_____ (U.S. Dollars) directly from my checking or savings account as a recurring monthly payment of the monthly tuition due for the student whose name is given above. My draft day is the _____ of each month. I affirm that I have read and signed the **NHSA** Tuition Policy to which this form is an addendum. I understand that there are no refunds on tuition or registration/enrollment fees, and I further understand that the **NHSA** Tuition Policy requires that I give a 30-day, written notice of my intent to withdraw the student named above from enrollment with **NHSA**. I further understand that this authorization is to remain in full force and effect until **NHSA** has received and acknowledged written notification from me of its termination. This notification must be given at least ten (10) days prior to the draft day noted above affording **NHSA** a reasonable opportunity to act on its termination.

Signature

Date