

Honey MacCallum Christian Preschool
Authorization Agreement for Recurring Payments
Credit Card or ACH Debit Payments

FOR OFFICE USE:

Tuition _____

I/We hereby authorize Honey MacCallum Christian Preschool (*Patuxent Presbyterian Church*) to initiate automatic debit entries to my credit card or checking/savings account as indicated below, at the depositories named below. (For ACH Debits please attach a voided check. Your request cannot be processed without a voided check.) This includes Registration Fees, Tuition, and Stay & Play.

ACH Bank Name _____
Bank Transit (Routing) ABA Number _____
Account Number _____
Account Type (Indicate Checking or Savings) _____

OR

CC Name on Credit Card _____
Credit Card Number _____
Credit Card Expiration _____
Billing Address _____

Debits will be made on the 1st of the month or the first business day of that month.

This authorization is to remain in full force and effect during months where tuition is due and the student is enrolled or until the Director of Honey MacCallum has received written notification from me/us of unenrollment PRIOR TO 48 hours of scheduled automated payment. I/We understand that it is my responsibility to notify the Director of Honey MacCallum of any changes to my credit card or banking information in writing.

ACCOUNT HOLDER MUST SIGN THIS AUTHORIZATION BELOW:

Signed: _____ Date: _____

Printed Name: _____ Phone: _____

Preferred Email: _____

Student(s) Name(s) _____

PLEASE ATTACH A VOIDED CHECK FOR THE ACCOUNT BEING DEBITED