



# Hop aboard the Tuition Express and never write a check again!

As your childcare provider, we are excited to offer you the convenience of automatic tuition payments directly from your checking account through Tuition Express. Your payment will be safely and securely processed by Tuition Express, giving you peace of mind that your tuition has been paid on time. Tuition Express enables you to select your draft date from 1 of 3 options: 5<sup>th</sup> of the month, 20<sup>th</sup> of the month or Bi-monthly (5<sup>th</sup> & 20<sup>th</sup>). To enroll, simply complete this form and return it along with a voided blank check to the Weekday School.

## ELECTRONIC FUNDS TRANSFER AUTHORIZATION

I (we) authorize **First Presbyterian Weekday School** [called CENTER in this Authorization form] to initiate debit entries to my (our) Checking Account indicated below at the depository financial institution indicated below [called DEPOSITORY in this Authorization form]. I (we) authorize CENTER to withdraw sufficient funds to pay my (our) childcare tuition and/or other childcare related fees that are due and payable. I (we) authorize CENTER to use the third party sender, Tuition Express to process all payments. I (we) acknowledge that the origination of Automated Clearing House (ACH) transactions to my (our) account must comply with the provisions of United States law.

Credit Union members: Please contact your Credit Union to verify account and routing numbers for automatic payments.

_____		_____	_____		
Your Name		Phone #	DEPOSITORY: Bank or Credit Union Name		
_____					
Address			Bank or Credit Union Address		
_____					
_____	_____	_____	_____	_____	_____
City	State	Zip	City	State	Zip
_____					
Routing Transit Number (see sample below)			Account Number (see sample below)		

This authorization will remain in full force and effect until I (we) notify CENTER in writing of its termination. Notification must be received at a minimum of 5 business days prior to termination date. First Presbyterian Weekday School will retain all parent (client) authorization forms in a secure location for a period of two years from the date of client withdrawal from the Tuition Express program.

_____	_____
Signature	Date

Payments will be processed on the 5<sup>th</sup> and 20<sup>th</sup> of each month. Please indicate below when you want your payments to be drafted.

\_\_\_\_\_ 5<sup>th</sup>

\_\_\_\_\_ 20<sup>th</sup>

\_\_\_\_\_ Bi-monthly (5<sup>th</sup> & 20<sup>th</sup>)

