

Tuition Debit Payment Option

MDOW can directly debit your checking account for tuition/aftercare payments. Please fill in this form and return to your child's teacher

Student name: _____

One time debit: amount \$ _____

Please select one: tuition extra session aftercare other _____

Parent signature _____ **date:** _____

or

Re-occurring monthly debit: \$ _____ (monthly tuition)

Please select beginning month/year: July September October November December
January February March April May 20__

Ending debit month: May 20__

Debits will be scheduled for the 1st of the month.

Parent signature _____ **date:** _____

Please complete and sign. This only needs to be done one time.

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

I (we) hereby authorize Mother's Day Out of Westchester, Inc., hereinafter called COMPANY, to initiate debit entries to my (our) Checking Account indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Attach voided check or fill in the following:

Depository Name: _____

Routing Number: _____

Account Number _____

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Printed Name(s) _____

Signed _____ date _____