



# Automated Payment Processing Safe – Convenient – Easy

We are excited to offer the safety, convenience and ease of Tuition Express® — a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

## ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR **BANK ACCOUNT** and **CREDIT CARD**

I (we) hereby authorize (business name) GEORGETOWN HILL EARLY SCHOOL to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. \_\_\_\_\_ (initial) Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

### COMPLETE ONE SECTION ONLY

#### SECTION A (Credit Card)

\* There is an additional surcharge for credit card transactions. There is no surcharge for Debit card transactions.

|                      |                 |                     |     |
|----------------------|-----------------|---------------------|-----|
| Cardholder Name      | Phone #         |                     |     |
| Cardholder Address   | City            | State               | Zip |
| Account Number       | Expiration Date | (Please circle one) |     |
| Cardholder Signature | Date            |                     |     |

#### SECTION B (Bank Account)

|   |                                   |                                   |                                  |     |
|---|-----------------------------------|-----------------------------------|----------------------------------|-----|
| Your Name                                 | Phone #                           |                                   |                                  |     |
| Address                                   | City                              | State                             | Zip                              |     |
| Bank or Credit Union Name                 | Bank or Credit Union Address      | City                              | State                            | Zip |
| Routing Transit Number (see sample below) | Account Number (see sample below) | <input type="checkbox"/> Checking | <input type="checkbox"/> Savings |     |
| Authorized Signature                      | Date                              |                                   |                                  |     |

#### For Official Use Only

|                    |
|--------------------|
| Date Received      |
| Employee Signature |

|   |                                  |              |
|---|----------------------------------|--------------|
| John Sample<br>Mary Sample<br>123 Nice Street<br>Anytown, USA | BANK OF THE WEST<br>555-555-5555 | 00226        |
| Pay to the order of: <b>Attach Voided Check Here</b> \$ _____ |                                  |              |
| Deposit slips not accepted _____ Dollars                      |                                  |              |
| 123456789   | 1800338                          | 0226         |
| Routing Number  | Account Number                   | Check Number |

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