## AUTOMATIC PAYMENT AUTHORIZATION FORM

Thank you for paying your tuition with Automatic Payment. Electronic payments save a lot of time and hassle for everyone. Banking rules require that you give your approval to pay your bill in this way. The approval remains active until you want to cancel it.

Automatic Payment is safe, efficient and consumer friendly. Banking laws protect consumers like you from having to worry about someone taking money from your account by using Automatic Payment in an unauthorized manner. Please complete this form, attach a voided check and return it to the office so we can initiate your automatic payment. If you are already enrolled and your banking information has changed, you must resubmit this form with voided check from your new account.

I hereby authorize Ames Child Care Center to initiate the entries to my checking or savings account at the financial institution listed below. This authority will remain in effect until five days after I provide Ames Child Care Center written notice to cancel it.

Your Name (please print)  Bank or Credit Union Name  Your Address  Bank or Credit Union Address  City State Zip  City State Zip  Account Number  Transit/ABA Number  Today's Date  My first automatic payment will be made on / /  Subsequent payments will be made every two weeks or  The amount of each payment shall be \$  Child's Name  JOHN DOE JOHN DOE JOHN DOE JOHN DOE JOHN DOE JOHN ACCOUNT Number  Child/Children  Office Use  Date Entered:  By: Child/Children						
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