

BURLINGTON NOTRE DAME SCHOOLS, Inc.

Tuition Auto-Pay

AUTHORIZATION FOR AUTOMATIC PAYMENTS

I (We) authorize Burlington Notre Dame Schools, Inc., to initiate a debit from my (our) (___) checking or (___) savings account at the financial institution named below. I (we) also authorize the above named company to initiate, if necessary, a credit entry to correct or adjust any entry made to my (our) account in error.

Name of Financial Institution

City, State, Zip Code

Financial Institution Routing Number

Checking/Savings Account Number

Name(s) EXACTLY as appears on Account

AUTHORIZATION AGREEMENT & TERMS

The above authorized account will be debited \$_____ monthly on the 15th day of each month, beginning July, 2017, and continue until the final tuition payment in May, 2018. If the posting date falls on a weekend or holiday, I (we) understand the account will be debited on the following business day.

This authority is to remain in full force and effect until Burlington Notre Dame Schools, Inc., has received written notice from me (us) of its termination in such time and in such a manner as to afford Burlington Notre Dame Schools, Inc., a reasonable opportunity to act on it.

I am aware that funds must be available **prior** to the time of the transaction or the authorized payment may be rejected by my financial institution. The financial institution may treat this as a NSF and I (we) may incur a service charge from the institution. Burlington Notre Dame Schools, Inc. may also assess a non-sufficient funds (NSF) charge of \$20.00. This amount will be added to my (our) tuition statement balance. Repeated NSF actions may result in termination of this service by Burlington Notre Dame Schools, Inc.

I (we) have been given a copy of this authorization for my (our) records.

Signature

Date

Signature

Date

Please attach a voided check (not a deposit slip) from your financial institution.