

FCDC AUTHORIZATION OF DIRECT PAYMENT

FCDC is pleased to offer you the utmost in convenience — Direct Payment. Now you can have your tuition payments automatically debited from your checking or savings account. And, you don't have to change your present banking relationship to take advantage of this service!

Direct Payment will benefit you in many ways:

- Convenience- saves time and avoids having to remember to drop off your tuition payments
- Save money eliminate the cost of using or mailing checks
- Safety eliminate the possibility of lost, stolen or forged checks

We believe you will like the added convenience of having your payments automatically withdrawn for you. Direct Payment is safe, convenient and easy. To take advantage of this service, complete the authorization form below and return it to Family Child Development Center.

This authorization form gives Family Child Development Center and your financial institution authority to withdrawal your payments from your account. Simply complete the form in order to take advantage of Direct Payment.

I authorize Family Child Development Center and the financial institution listed below to initiate electronic debit entries, and if necessary, credit entries and adjustments for any debit entries in error to my account. This includes tuition payments as well as authorized field trip or sunscreen charges, as applicable. FCDC also reserves the right to charge my account \$30 for a transaction that is results in insufficient funds or in the event of a late pick up fee. I understand that this authorization will remain in effect until I have cancelled this authorization in writing. I understand that Family Child Development Center requires at least 14 days prior notice to cancel this authorization.

Name of parents:				
Name of child(ren) atten	ding the center:			
Frequency of debits:	Weekly	Bi-Weekly	Monthly (4 weeks)	
Debit range of acceptabl	e dollar amount	s authorized (based	on frequency of debits): \$	
Please initial below to au	uthorize ACH pay	yment for the follow	ving: authorized field trip charges	authorized sunscreen fee
-	-		rmission for your child to participate in f arge for these via ACH as these charges a	•
Primary Account Numbe	r:			
Primary Routing Number	r:			
	PLEASE AT	TACHED A VOIDED C	HECK FOR EACH ACCOUNT LISTED ABOV	/E.
Print Name:				

Date: _____