

St. Laurence Catholic School – 2018-2019
AUTHORIZATION AGREEMENT for AUTOMATIC PRE-AUTHORIZED DEBITS
(ACH DEBITS)

Parent(s) name: _____

Student name(s): _____

COMPANY NAME: ST. LAURENCE CATHOLIC SCHOOL

I (we) hereby authorize ST. LAURENCE CATHOLIC SCHOOL, hereinafter called COMPANY, to initiate debit entries (pre-authorized drafts or withdrawals) and to initiate, if necessary, credit entries and adjustments for credit entries in error to my (our)

Checking or Savings account (select one)

indicated below at the depository named below, hereafter called DEPOSITORY, to credit and/or debit the same to such account.

Use the same account information as my tuition ACH
(if selected skip to ACH Deduction Breakdown))

NAME OF DEPOSITORY INSTITUTION: _____

TRANSIT/ABA NO. _____ ACCOUNT NO. _____

ACH Deduction Breakdown:

Monthly BASC fee	\$250.00 x # of children _____ =	_____
Convenience Fee		+ \$1.00
Total Monthly ACH		\$ _____

This authority 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.

Name(s): _____ E-mail: _____
Please print

Telephone: (H): _____ (C): _____

Signature on Account: _____ Date: _____

Please note there will be a monthly convenience fee of \$1.00 and a \$25.00 return fee for NSF ACHs. Please remember to notify the school if banking information changes.
If the 2nd of the month falls on a holiday or weekend, your withdrawal will occur on the next business day.
A withdrawal will never occur earlier than the 2nd.