



Authorization for Charges Child's Name: _____

Our preferred method of payment is ACH Transaction (automatic withdrawal from a bank account.)

Authorization for Recurring Direct Payments (ACH Debits)

In consideration of the services provided to me by Kids 'R' Kids Southshore (KRK), I hereby authorize KRK to initiate a debit entry to my account indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account for the amount and frequency listed below. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

Depository Bank Name (Your Bank Name): _____

Account Number: _____ Routing Number: _____
(9 digits)

Account Type: Checking OR Savings

Amount: The total tuition plus any registration fees or late fees as applicable

Frequency: Weekly OR Bi-Weekly OR Monthly ACH START DATE: ____/____/20__

The specific debits to my account authorized herein may only post on or after the START DATE listed above, and in no event may the debit transaction post to my account prior to said date. This authorization is to remain in full force and effect until KRK has received notification from me of termination in such time and in such manner as to afford KRK and DEPOSITORY a reasonable opportunity to act. I may only revoke this authorization by contacting KRK directly.

Print Name

Signature

Date

Office Use Only