

2017-2018 SCHOOL YEAR TUITION

(New EFT form required every year)

Authorization Agreement for Pre-Authorized Tuition Payments

I (we) hereby authorized St. Michael School to initiate debit entries to my (our) [] Checking OR [] Savings account (select one) indicated below and the Depository name below to debit same to such account.

Depository Name: _____ **Account Number:** _____

City: _____ **State:** _____ **Zip:** _____

This automatic deduction will be made on the 20th of every month.

I authorize St. Michael School to **begin** this electronic transfer of funds the month of July 2017.

This authority is to remain in full force and effect from the month indicated until April 20, 2018 or until the full tuition amount has been paid to St. Michael School.

The termination of automatic deduction may take place under agreement by both St. Michael School and Parents (i.e. student withdraw).

Total Tuition Commitment: \$ _____

+ \$ 25 **EFT Fee**

+ \$ _____ **Stewardship Fee**

Total Due \$ _____ **by 10 payments =**

{ \$ _____ **automatic monthly deduction**}

Name: {printed} _____

Date: _____

Signature: _____

Phone: _____

Directions:

To establish an Electronic Transfer of Funds for your 2017-2018 School Year Tuition, please complete this form and **attach a voided check OR encoded deposit slip** from your savings account.