

2011/2012 Childcare Auto Debit Authorization Form

Valley Montessori School

Please complete & return with a voided check.

- Monthly auto debits for childcare begin Sept.15, 2011 and end May 15th, 2012.
- Your childcare schedule is a monthly commitment. Changes and cancellations are **only** done on a monthly basis.
- Scheduled childcare is \$9/hr. Emergency childcare is billed at \$15/hour. Late pick up is billed at \$1/minute.
- A \$25 fee will be assessed if your bank rejects this auto debit payment.

Unpaid childcare charges will be auto debited from account below on the 15th of the following month.

Family/Child's Last Name: _____ (please print)

Bank Account Holder Name: _____ (please print)

Checking Savings Bank Name: _____ Bank Routing # _____

Bank Account Number: _____

Please circle the preferred childcare schedule for your child(ren). START MONTH OF: _____

MORNINGS		Mon	Tues	Wed	Thurs	Fri	# of students	Total Monthly Auto Debit
FD & AM Todd/Prim/Elem/MS	7:30am-classtime	\$36	\$36	\$36	\$36	\$36		
LUNCH CLUB								
Toddler Half-Day	11:45am-12:45pm	\$50	\$50	\$50	\$50	\$50		
Primary Half-Day	12:00pm-1:00pm	\$36	\$36	\$36	\$36	\$36		
EXTENDED DAY								
Primary AM	12:00pm-3:00pm	\$108	\$108	\$108	\$108	\$108		
AFTERNOONS								
FD & PM Todd/Prim/Elem/MS	.5 hour	\$18	\$18	\$18	\$18	\$18		
FD & PM Todd/Prim/Elem/MS	1 hour	\$36	\$36	\$36	\$36	\$36		
FD & PM Todd/Prim/Elem/MS	1.5 hours	\$54	\$54	\$54	\$54	\$54		
FD & PM Todd/Prim/Elem/MS	2 hours	\$72	\$72	\$72	\$72	\$72		
FD & PM Todd/Prim/Elem/MS	2.5 hours	\$90	\$90	\$90	\$90	\$90		
FD & PM Todd/Prim/Elem/MS	3 hours	\$108	\$108	\$108	\$108	\$108		
TOTAL Monthly Childcare Amount to be debited on or after the 15th of each month \$								_____
<i>Sep 15, 2011 – May 15, 2012</i>								

It is understood that (1) childcare payments will be debited on or after the 15th day of each month and (2) if the bank account information or charges listed change for any reason, a new authorization form must be completed. I/we hereby authorize Valley Montessori School to initiate debit entries to my/our account: I/we acknowledge that the origination of ACH transactions to my/our account must comply with the provisions of U.S. law. This authorization shall remain in effect until Valley Montessori School has received written notification from me (either of us) of its termination in such time and in such manner as to afford Valley Montessori School and Depository Institution a reasonable opportunity to act upon it or Valley Montessori School provides notification to me (either of us). Debit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.

Signature: _____ Date: _____

OFFICE USE ONLY

New Childcare Auto Debit Change in Bank Account Info Cancellation of Childcare Auto Debit New childcare schedule

ADDING TO existing childcare schedule Effective Date: _____