



Court yard ACH Authorization

Child(ren)'s Name: _____

Parent Name: _____

Date to Begin ACH: _____ / _____ / _____

Transaction Options

I would like my tuition drawn out of my account as follows:

_____ Option 1: Every Other Week on Monday

_____ Option 2: Every Four Weeks on Monday

A \$25.00 ACH Annual Fee will be processed during the first month of enrollment, and again each January during enrollment. The fees cover set up time, and per transaction bank fees. No refunds will be granted for any reason.

Terms and Agreement

Please initial on each line.

_____ I understand that Court yard will calculate the amount withdrawn based on your weekly tuition rate, and will create ACH transactions to ensure that your account is paid in full at all times.

_____ I understand that all withdrawals will be credited to my Court yard financial account.

_____ I understand that should Court yard withdraw the incorrect amount due to a tuition adjustment (increase or decrease) or a simple error, that I authorize Court yard to execute an additional withdrawal as needed, or lower a future withdrawal amount as needed to get my Court yard financial account to balance.

_____ I understand that I can request a statement at any time by emailing Christa@Court yardEarlyLearningCenter.com.

_____ I understand that if I see an error on my statement compared to the withdrawals from my banking account, that I will consult with Christa to ensure that the error is resolved and either credited to my account or refunded.

_____ I understand that should I want to cancel, I must notify Christa in writing two weeks prior to the desired ACH cancellation date.

Financial Information

_____ Bank Name
_____ Bank Routing Number
_____ Bank Account Number

By signing below, you authorize Court yard Early Learning to withdraw your tuition from the above account.

Signature: _____ Date: _____

- ☐ Bank
- ☐ ACH Tracker