



THE
BURLINGTON
SCHOOL

AUTO-DRAFT AUTHORIZATION AGREEMENT

2019-2020 School Year

FOR AUTOMATIC BANKING DRAFTS (ACH DEBITS)

I (we) hereby authorize The Burlington School., hereinafter called TBS, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) _____ Checking _____ Savings account (select one) indicated below and the depository named below, hereinafter called DEPOSITORY, to debit and/or credit the same to such account when due in an amount equal to the Monthly Payment(s) as specified on the Tuition Payment Schedule for my (our) most current Enrollment Contract(s) with TBS as well as monthly Extended Day and Coordinate Program charges. I (we) hereby authorize TBS and DEPOSITORY to debit such account for any applicable Insufficient Funds charges, Check Returned charges, Late Payment charges or incurred Fees as specified on the Tuition Payment Schedule for my (our) most current Enrollment Contract(s) with TBS.

DEPOSITORY:

BANK NAME _____ BRANCH _____

CITY _____ STATE _____ ZIP _____

TRANSIT/ABA NO. _____ ACCOUNT NO. _____

Please circle your draft date: **1ST** or **15TH** (Must select the 15th for Extended Day)

Student Name: _____

This authority is to remain in full force and effect until TBS has received written notification from me (or either of us) of its termination in such time and in such manner as to afford TBS and DEPOSITORY a reasonable opportunity to act on it.

NAME (1): _____ NAME (2): _____
(PLEASE PRINT) (PLEASE PRINT)

SIGNED(1): X _____ DATE _____

SIGNED(2): X _____ DATE _____

***** ATTACH A VOIDED CHECK*****