

We are excited to offer the safety, convenience and ease of Tuition Express<sup>®</sup> – an automatic payment processing system that allows on-time tuition and fee payments to be made from your bank account.

## AUTHORIZATION FOR BANK ACCOUNT

I (we) hereby authorize <u>Pettengill Academy</u> to initiate debit entries to my (our) Checking or Savings Account indicated below. To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice.

Credit Union Members: Please contact your Credit Union to verify account and routing numbers for automatic payments.

Your Name	Phon	Phone #			
Address	City	State		Zip	
Bank or Credit Union Name	Bank or Credit Union Address	City	State	Zip	
xxxxx	xxxxxxxx		Checking	Savings	
Routing Number (Last 4 Digits ONLY)	Account Number (Last 4 Digits ONLY)				
Signature	Today's D	ate			
Check if you wish to make online pays	ments		A s	ervice of	
For Official Use Only Date Received	PAY TO THE ORDER OF	DATE DOLLARS	e Ta	ocare	
Employee Signature	123456789 000123456789   Routing Accounting			OFTWARE <sup>®</sup>	
	< Cut Here >		Checking	Savings	
Routing Transit Number	Account Number				
For Security, please	Today's D	ate			
return this Section of the Authorization	Form.				

□ Shred this Section of the Authorization Form.