



AUTHORIZATION AGREEMENT FOR  
DIRECT PAYMENTS (ACH DEBITS)

Company Name: **Emmanuel's Preschool & DayCare Center**

I (we) hereby authorize **Emmanuel's Preschool & DayCare Center**, hereinafter called COMPANY, to initiate monthly debit entries to my (our) Checking Account / Savings Account (select one) indicated below at the depository financial institution named below, hereafter called DEPOSITORY. and the COMPANY is authorized to debit the same to such account for monthly tuition and daycare payments, as applicable and as communicated to you prior to such transaction (via invoice). I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository Name \_\_\_\_\_

Branch \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

**Please attach a  
voided check if  
using a Checking  
Account**

Routing Number \_\_\_\_\_  Checking

Account Number \_\_\_\_\_  Savings

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

Name(s) \_\_\_\_\_ Date \_\_\_\_\_  
(Please Print)

Child's Name \_\_\_\_\_

Signature \_\_\_\_\_

**Place in lockbox in Preschool office or deliver to the Director or Church Secretary**