



Purpose School Tuition Payment Plan

Return the completed form to the Purpose School **along with a voided check (not a deposit slip)** from the checking account to be withdrawn. If your payments are to be deducted from a **savings account, ask your bank to provide you with a specification sheet for ACH withdrawals.** (Deposit slips cannot be accepted as the data on them is not necessarily the same as the data required for ACH transactions.)

Student Name:	
Student Name:	
Student Name:	
Please Check One: <input type="checkbox"/> Enrollment <input type="checkbox"/> Change	
Financial Institution Information	
Account Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
Bank Name:	
Routing Number: _____ Account Number: _____	
Amount to be deducted each month: \$ _____ Start Month: _____ (September 1 = October, October 1st = November, etc.)	
<p>By signing below, I authorize PS/FCCOS to automatically deduct tuition payments for the specified amount from my financial institution on the 1st day of each month, or the next available business day, until the last payment for the current school year which is May1st (or the next available business day).</p> <p>I understand that this authorization will remain in force until PS/FCCOS has received written notification from me of its amendment or termination in such time and in such manner as to allow PS/FCCOS and my financial institution a reasonable opportunity to act on it.</p> <p>I also understand that any payment requests returned due to insufficient funds will not be resubmitted for payment and a \$25 NSF fee may be charged.</p>	
Account Holder's Name (Please Print):	
Account Holder's Signature:	Date:

Office use only

<i>PS Review Date</i>
<i>FCC Entry</i>