



# Ankeny Christian Academy

## AUTOMATIC DEBIT AUTHORIZATION FORM

### IDENTIFICATION- Please complete

Name: _____	Social Security Number: _____
Address: _____	
Phone Number: _____	Email Address: _____

### FINANCIAL IDENTIFICATION – Please complete

<b>Action Requested</b> <input type="checkbox"/> Initial Set-Up <input type="checkbox"/> Change <input type="checkbox"/> Cancel	Name of your Financial Institution: _____ Address: _____
	Account Number: _____ Checking <input type="checkbox"/> or Savings <input type="checkbox"/>
	Bank Routing Number: _____ **(see below)
	Circle weekly, monthly, or both: <b>Weekly</b> - Every Tuesday for current week charges. Yes ___ No ___ I would like to receive an e-mail telling me this week's amount. I would like to make a weekly contribution of \$ _____. <b>Monthly – Circle Date:</b> 1 <sup>st</sup> or 15 <sup>th</sup> day of each month. ___ Tuition only ___ Tuition plus Before/After School Care for current month. ___ Tuition plus Contribution \$ _____. ___ Contribution Only \$ _____. Yes ___ No ___ I would like to receive an e-mail telling me this month's amount.

### AUTHORIZATION- Please read

I authorize **Ankeny Christian Academy** to debit by electronic transfer from my account above and credit by electronic transfer to **Ankeny Christian Academy** the amount that I have indicated above. I acknowledge responsibility for providing complete and accurate information on this authorization **Ankeny Christian Academy** form and understand that **Ankeny Christian Academy** may contact my financial institution to confirm accuracy of information. This authorization is to remain in effect until I provide written notice of cancellation. **Ankeny Christian Academy** reserves the right to reverse an incorrect posting however, I fully understand that **Ankeny Christian Academy** must notify me on or before the settlement date and explain the reason for the reversal. I further understand that if changes occur in my account, i.e., changing account number, closing account, changing banks, etc. **it is my responsibility to contact Ankeny Christian Academy immediately.**

\*\*To expedite processing, staple a voided check to this form. The routing number of your bank is the first set of number at the bottom of your check located on the left xxxxxxxx: (9 digits). Your account number is the next set of numbers (please include all 0's in the account number).

This automatic transfer will start on \_\_\_\_\_, and will continue each month or week thereafter, unless revoked by me in writing.

Signature \_\_\_\_\_