

Holy Name Catholic School
Debit Authorization
2015-2016 School Year

Thank you for choosing to make your tuition payments via electronic debit from your account.

Tuition / Payment Plan	10-month plan ~ September thru June
Catholic Student(S)	
Non-Catholic Student(s)	
Pre-K Student(s)	
Other	

Enter the amount of the deduction \$ _____

Deduction will be made on the 5th of each month

Your Name: _____

Bank/Financial Institution Name: _____

Account Number: _____

Routing Number: _____

Please indicate (circle) whether the account is a **CHECKING** or **SAVINGS** account

I authorize Holy Name Catholic School and the Financial Institution listed above to initiate electronic entry to my account each month. This authority will remain in effect until approved annual tuition is paid in full. I understand that Holy Name Catholic School may initiate a reversal of any entry made under this agreement if an error has been made.

Signature: _____

Date: _____