

Automated Payment Processing

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

I (we) hereby authorize (business name) _____ to initiate credit card charges to the below-referenced credit card account **(Section A)** OR, initiate debit entries to my (our) checking or savings account, indicated below **(Section B)**. 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. Check with the center for accepted credit card types. **Complete one section only.**

Child's Name

Section A: Credit Card

Cardholder Name

Phone #

Cardholder Address

City

State

ZIP Code

Account Number

Expiration Date

Cardholder Signature

Date

Section B: Bank Account

Your Name

Phone #

Address

City

State

ZIP Code

Bank or Credit Union Name

Address

City

State

ZIP Code

Routing Number

Account Number

☐ Checking
☐ Savings

Authorized Signature

Date

For Center Use Only

Date Received

Employee Signature