



ETON
SCHOOL

ACH Debit Enrollment/Authorization Form

I. General Information (Please Print)

Account Holder Information

Joint-Account Holder Information

First Name		Last Name		First Name		Last Name	
Address		Address (if different from Account Holder)					
City, State, Zip		City, State, Zip					

II. Name(s) of Child(ren): _____

III. Tuition Payment Plan Schedule: Debit to occur in accordance with terms set forth by the payment plan selected on the Enrollment Agreement(s).

(Initials) I/we authorize Eton School to debit from my/our bank account as supplied below. The amount to be debited shall be the amount set forth by the payment plan selected on the Enrollment Agreement(s).

IV. Clubhouse Payment Plan Schedule: Recurring Debit on the twentieth (20th) of every month

(Initials) I/we authorize Eton School to debit from our bank account as supplied below. The amount to be debited each month shall be the amount indicated on the monthly Clubhouse invoice.

V. Bank Account Information (Please Print)

Bank Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Routing Number: _____ Account Number: _____

Attach an unsigned voided check to this form

VI. Terms and Conditions

I/we hereby authorize Eton School to initiate debit entries to my/our account indicated above and the Bank named above, to debit such account. I/we acknowledge the origination of ACH transactions to my/our account must comply with the provisions of the applicable U.S. laws. This authorization shall remain in effect until Eton School receives written notification from me/either of us of my/our intent to terminate at such time and in such manner, as to afford Eton School and the Bank a reasonable opportunity to act on it (minimum 30 days).

Account Holder Signature _____

Date _____

Joint Account Holder Signature _____

Date _____