



Northshore  
School District

Business Office

3330 Monte Villa Parkway  
Bothell, WA 98021-8972  
425-408-7642

**Authorization Agreement for Direct Payments  
2019 – 2020 Northshore Ready Start Tuition Program  
(ACH Withdrawal)**  
*(Please Print)*

Parent/Guardian Name(s) \_\_\_\_\_

Student's Name \_\_\_\_\_ School \_\_\_\_\_

I (we) hereby authorize the Northshore School District to initiate withdrawals to my (our) indicated below.

*(select one)*     Checking Account     Savings Account

This withdrawal will be for \$300.00 per month for nine (9) months for full tuition for nine months.

**Withdrawal will occur the 7<sup>th</sup> calendar day of each month beginning in September 2019 and ending in May 2020.**

In the event of insufficient funds, you will receive a letter from our Business Services Office to make arrangements for immediate repayment. A \$25 fee will be added to the amount due.

I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

**Required Parent(s)/Guardians(s) Information:**

Financial Institution \_\_\_\_\_

Transit Routing/ABA Number \_\_\_\_\_

Account Number \_\_\_\_\_

This authorization will remain in full force and effect until May **2020** or until written notification of change or termination is received by the Northshore School District.

Parent/Guardian Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

Attach a VOIDED check