Authorization Form for Bank Draft

1	, do hereby authorize Pamlico Christian Academy to				
, , ,	•	•			ive listed below. I understand that if at ristian Academy of its termination and
-					to act on it. The Bank Draft program
is a free service provided	by Pamlico Chi	ristian Academy	u. In the event that	t Pai	mlico Christian Academy withdraws
-	•	•			o credit my account for an amount not
to exceed the original am	•			-	· · · · · · · · · · · · · · · · · · ·
Please attach a voided cl	heck and comp	lete the follow	<mark>ing:</mark>		
Date					
Bank Name					
Account Type:					
Bank Routing #					
Bank Account #					
Start Date:					
Draft Amount: \$					
Frequency of Draft:		☐ One time	only		Monthly
For Donations Only:			Payment Only:		
day of e	each month		_ day of each mo	nth	
Name:					
First	Middle	Last			
Signature:					