



Pamlico Christian Academy

change your child's life

Authorization Form for Bank Draft

I _____, do hereby authorize Pamlico Christian Academy to draft my account from the banking institution and account that I have listed below. I understand that if at any time I decide to discontinue this payment service, I will notify Pamlico Christian Academy of its termination and in such a manner as to afford the financial institution reasonable opportunity to act on it. In the event that Pamlico Christian Academy withdraws funds erroneously from my account, I authorize Pamlico Christian Academy to credit my account for an amount not to exceed the original amount of the erroneous debit. Then debit the correct amount.

Please attach a copy of voided check and complete the following:

Date _____

Bank Name _____

Account Type: _____

Bank Routing # _____

Bank Account # _____

Start Date: _____

Draft Amount: \$ _____

Frequency of tuition Draft: Monthly One time Annually Bi-Annually

For Monthly Donations Only:

on or around the _____ 5th _____ day of each month

Name: _____

First

Middle

Last

Signature: _____

Typing your name above serves as an electronic signature