BAY AREA DEBATE CLUB



45630 Parkmeadow Court Fremont, CA 94539 www.bayareadebateclub.com Email: info@bayareadebateclub.com

Phone: 510-573-2497 Fax: 510-372-0427

INSTRUCTIONS:

- 1. Complete the form including Parent contact information for Emergency and important communication.
- 2. Mail or fax the completed form and a copy of a voided check for the account to be debited to address listed above.

CLASS REGISTRATION AND AUTOMATIC PAYMENT AUTHORIZATION

	Grade
Parent/Guardian Name:	Phone:
Contact Email:	
Amount per Month: \$60 Number of Payments: 7 Payments will be debited around 10 th of every month	Bank Account Info: Financial Institution: Account Number: Routing Number:
above for the purpose of paying class regis institution is authorized to debit my account in full force and effect until either I revoke	to initiate debits (payments) to the financial institution indicated stration fees for above mentioned student. This financial nt for the amount mentioned above. This authority is to remain e it by giving 10 days prior written notice to Bay Area Debate e Club after the number of payments mentioned above are
•	nonth was unsuccessful whether due to insufficient funds or
bank error, Bay Area Debate Club has the	nonth was unsuccessful whether due to insufficient funds or