## **AFTERSCHOOL** BANK DRAFT FORM

REGISTRATION PACKET PG. 4 of 4

<b>BEST SCHOOL of Twin Pe</b>	aks Afterschool Agreen	nent ACH/CC Automatic Payme	nt Option
STEP #1			
CHILD'S FIRST NAME	MIDDLE INITIAL	LAST NAME	
PHONE NUMBER (DAY)		PHONE NUMBER (EVENING)	
CHILD'S SCHOOL	CHILD'S ADDRESS	CITY STATE	: ZIP
STEP #2		STEP #3	
		DRAFT DATES	AMOUNT
Begin Draft Date:		Monthly on the 1st	\$
//		Semi-Monthly on the 1st & 15th	\$
STEP #4			
■ OPTION 1: CREDIT/DEBIT CARD		■ OPTION 2: BANK DRAFT	
Check one: Uisa Master	card Discover AmEx	ACCOUNT HOLDER NAME	BANK NAME
FILL HERE	FILL HERE		
CARDHOLDER NAME	CVV	routing/transit # FILL HERE	BANK ACCOUNT # FILL HERE
AUTOMATED CLEARINGHOUSE(ACH) IN OR CREDIT CARDS ONLY.  Only 1 Form of Draft Payment can be endered on the control of the contr	tered per person.  have a larger draft amount on May 15 monthly on the 1st. First draft begins a inge a Bank Account I must provide a will be used to transfer payment from hed for non-sufficient funds I will be ch terCard, Discover, and American Expi ms, I will be ineligible to use the autor	Aug. 1. school with at least a 2 week notice. my account. arged a \$30 fee. ress.	CCEPTED. MUST BE ACH
	0:		
Account Holde	r Signature		Date
Please Staple Here	PLE VOIDE	D CHECK HERE	■ Please ■ Staple Here