



# OUR LADY OF GOOD COUNSEL PRESCHOOL

10504 – 139<sup>th</sup> Street, Surrey, BC V3T 4L5

Phone: (604) 581-3225 Email: [olgcpreschool@shaw.ca](mailto:olgcpreschool@shaw.ca)

[www.olgcpreschool.ca](http://www.olgcpreschool.ca)

## Pre-Authorized Debit (PAD) Plan Agreement

I/We authorize Our Lady of Good Counsel Preschool (OLGC Preschool) and the financial institution designated to begin deductions as per my/our instructions for monthly regular recurring tuition payments and/or one-time payments from time to time for other related preschool fees as stated above.

Authorization is to remain in effect until Our Lady of Good Counsel Preschool has received written notification from me/us of its change or termination. Notification must be received 14 days before the next debit is scheduled. I/We may obtain a sample of cancellation form or more information on my/our right to cancel a PAD Agreement at my/our financial institution or by visiting [www.payments.ca](http://www.payments.ca).

I/We have certain recourse rights if any debit does not comply with this PAD agreement. For example, I/We have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD agreement

### Bank Account Information:

Please attach a VOID Cheque or Financial Institution Form, ensuring it includes the following:

- Financial Institution Number, Branch Transit Number, Account Number
- Name of Financial Institution and Branch Address

### Pre-Authorized Debit (PAD) Payments:

The Payor will be debited for the following fees on the appropriate dates stated below:

☐ **Fun Family Phonics Workbook Fee (non-refundable): \$17.00/per student (September 1, 2023)**

☐ **Monthly Preschool Fees: \$\_\_\_\_\_ commencing from September 2023 to June 2024**  
(Fees are withdrawn 1<sup>st</sup> day of each month or the next business day)

### Payor Information (please print clearly)

Payor Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_

City/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Student(s): \_\_\_\_\_