



## Easy Tuition Payment Option

### ACH Authorization Form

#### *DEBIT AUTHORIZATION FORM*

I (we) hereby authorize Montessori Education Center of Hawaii, Inc. (THE COMPANY) to initiate entries to my ( our) checking/savings accounts at the financial institution listed below (THE FINANCIAL INSTITUTION), and, if necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until THE COMPANY is notified by me (us) in writing to cancel it in such time as to afford THE COMPANY and THE FINANCIAL INSTITUTION a reasonable opportunity to act on it.

\_\_\_\_\_  
(Name of Financial Institution)

\_\_\_\_\_  
(Address of Financial Institution - Branch, City, State, & Zip)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Name - PLEASE PRINT)

\_\_\_\_\_  
(Address - PLEASE PRINT)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zipcode

Set Amount: \$ \_\_\_\_\_ On or Around (2 Days) the \_\_\_\_\_ Day of the Month  
On a Recurring Schedule of \_\_\_\_\_ Months\*, Beginning \_\_\_\_\_

I would like to retain my payment info on file to process Individual Payments as directed.

*\*Recurring schedules are only available for Fall/Spring Tuition. Summer tuition cannot be scheduled.*

Financial Institution Routing Number: \_\_\_\_\_

Checking/Savings Account Number: \_\_\_\_\_

Please include a Voided Check or Account Verification with this form (Required).

\*Failure to provide account verification could result in \$10 charge for returned check fee. These numbers are normally located on the bottom of your check as follows:

1234 56 789 1234 56 7890 123 12

\_\_\_\_\_  
Routing Number

\_\_\_\_\_  
Account Number