

## Authorization Agreement for Direct Deposits (ACH Debits)

Peace Lutheran Preschool  
701 South Century Avenue  
Waukegan, WI 53597

I (we) hereby authorize Peace Lutheran Preschool to electronically debit my (our) checking/savings account at the financial institution listed below (The Financial Institution) and if necessary may make adjustments electronically for any transactions credited/debited in error. I (we) understand that this authorization will remain in full force through the academic school year unless I (we) notify Peace Lutheran Preschool in writing that I (we) wish to revoke this authorization. I (we) understand that Peace Lutheran Preschool requires 30 day notice in order to cancel the authorization.

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Name of Financial Institution

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Address of Financial Institution – Branch, City, State, & Zip

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Signature

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Date

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Name – please print

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Address – please print

Monthly Preschool Tuition \$ \_\_\_\_\_.

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

\_\_\_ Checking **OR** \_\_\_ Savings Account Number: \_\_\_\_\_

**Please attach a voided check.**