

**AUTO-WITHDRAWAL AUTHORIZATION FORM**

Effective date of authorization: _____		
Type of Authorization Form: <input type="checkbox"/> New Authorization <input type="checkbox"/> Change Banking Information <input type="checkbox"/> Change of Amount or Frequency		
Last Name: _____		First Name: _____
Address: _____		
City: _____	State: _____	Zip: _____
<b>Date of First Payment:</b> _____/_____/_____	<b>Frequency of Payment:</b> ____ Weekly ____ Twice Monthly ____ Monthly on the 1 <sup>st</sup> ____ Monthly on the 15 <sup>th</sup>	<b>Tuition Amount:</b> \$ _____ \$ _____ \$ _____ \$ _____
<b>Checking/Savings</b>		
Please debit my tuition from: _____ Savings Account _____ Checking Account		
Routing Number: _____ Account Number: _____ <i>(Valid Routing # must start with 0, 1, 2, or 3)</i>		
I authorize the above organization and Vanco Services, LLC to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.		
Authorized Signature: _____ Date: _____		
<b>Credit Card</b>		
Please charge my tuition to my (check one): _____ Visa _____ MasterCard		
Credit Card Number: _____ Exp Date: _____ Security Code: _____		
Name on Card: _____		
Billing Address (if different from above): _____		
I authorize the above organization and PaySimple/Gradelink to charge my credit card in accordance with the information above.		
Authorized Signature: _____ Date: _____		
<i>Please attach a voided check or deposit slip over the credit card section if using a checking/savings account.</i>		
<b>Fees</b>		
Please be aware of possible fees. These will be applied to your tuition balance, should they occur.		
	Insufficient Funds	\$30.00
	Change of Payment/Frequency	\$3.00
	Change of bank information	\$3.00
		ES11409