



Holy Name School Tuition Payment Automatic Withdrawal Form
2020-21 School Year
Payments begin August 2020 through May 2021

Family Name on School Account: _____

Students: _____

Holy Name Parishioner: _____ Yes _____ No

Please Choose Payment Date for Withdrawal: _____ 15th or 25th _____

_____ Please mark an X on the line if payments will be made in the school office. We accept cash, checks, debit/credit cards and money orders.

Monthly Amount: _____

Please choose one of the following automatic payment options:

_____ CHECKING ACCOUNT WITHDRAWAL

Banking Information: **(Requires a voided check)**

Bank Name: _____

Bank Account #: _____ Bank Routing #: _____

_____ **DEBIT ACCOUNT:** Name on card: _____

Billing Address: _____ City _____ State _____ ZIP _____

Card Number: _____ Expiration: ____/____ CVC: _____

_____ **CREDIT CARD:** Name on card: _____

Billing Address: _____ City _____ State _____ ZIP _____

Card Number: _____ Expiration: ____/____ CVC: _____

I authorize the amount of to be withdrawn from my account beginning on the _____ of (month) _____ for a total of 10 payments (Aug.-May) 10 months to cover the yearly tuition fee.

Printed Name: _____
 (Main Account Holder)

Signature: _____
 (Main Account Holder)