



3221 Sand Lake Rd, Longwood, FL 32779 | Phone: (407) 869-8882 | Fax: (407) 637-5309 | www.pacebrantley.org

Recurring ACH/EFT Payment Authorization Form

Sign and complete this form to authorize Pace Brantley School to make recurring electronic debit to your bank account listed below. This form gives the Finance Department at Pace Brantley permission to debit your account for the amount indicated no sooner than the **1st of each month for the 2017-2018 school year**. This is permission for recurring payment(s) of one or all of the following; tuition, before/after care, or any other related fees to your child's account at Pace Brantley School.

Please complete the information below:

I _____ authorize Pace Brantley School to charge my bank account indicated
(Full Name)

below for _____ **on the 1st**. This payment is for _____
(Amount) (Student Full Name and Description of goods/services)

Billing Address _____ **Phone Number** _____

City, State, Zip _____ **Email** _____

Name on Bank Account _____

Type of Account _____

Bank Name _____

ABA Routing Number _____

Bank Account _____

By signing, I authorize the above named business to make a recurring electronic debit to the bank account indicated in this authorization form according to the terms outlined above. This payment authorization is only for the goods/services and the amount indicated above; **this is valid for use through 2017-2018 school year only**. I certify that I am an authorized user of this bank account and agree that these charges will not be disputed with my Financial Institution; so long as the transaction corresponds to the terms indicated in this form.

SIGNATURE _____

DATE _____