

Direct Payment

We are pleased to offer you a new option for making your tuition payment – the Direct Payment Plan. Now you can have your tuition and other fees automatically deducted from your checking or savings account via an Automatic Clearing House (ACH) transaction.

The Direct Payment Plan (ACH) will help you in several ways:

- It saves time – fewer checks to write.
- Helps meet your commitment in a convenient and timely manner – even if you're on vacation or out of town.
- It saves postage
- It's easy to sign up for, easy to cancel.

Each month you will continue to receive a statement detailing tuition and other fees. The full amount of the statement balance will be withdrawn from your account

Here's how the Direct Payment Plan works:

You authorize tuition and other related charges to be deducted from your account. Your payment will be made automatically on the 15th of each month. Your payment will appear on your checking or savings account statement. The authority you give to debit your account will remain in effect until you notify us in writing to terminate the authorization. The Direct Payment Plan is dependable, flexible, convenient and easy. To take advantage of this service, complete the attached authorization form and return it to us.

All you need to do is:

1. Mark the box before type of account to indicate whether your payment will be deducted from your checking or savings account.
2. Fill in your name, financial institution name and location, and date.
3. Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please fill in your account number and routing number.

NOTE: Be sure to sign the form!

AUTHORIZATION FOR DIRECT PAYMENT

I authorize **HILL- MURRAY SCHOOL** to initiate electronic debit entries for payments of my tuition and other fees. Please debit the following account:

- Checking account
- Savings account

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of the U.S. law. This authority will remain in effect until I have cancelled it in writing.

Date: _____

Financial Institution Name: (Please Print) _____

Account Number at Financial Institution _____

Financial Institution Routing/Transit Number _____

Financial Institution City and State _____

Signature: _____

**STAPLE VOIDED CHECK HERE
PLEASE KEEP A COPY OF THE AUTHORIZATION FOR YOUR RECORDS**