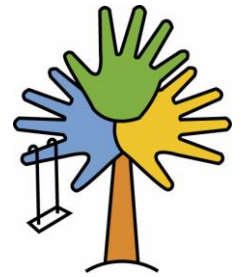


# AUTHORIZATION FORM



Organization:  
 Central Early Childhood Center  
 5144 Oak Street, Kansas City, MO 64112  
 central\_ecc@yahoo.com

For Office Use Only: 56056816428ECC		DATE	
Effective date of authorization: ____/____/____ Name of child(ren): _____			
Type of authorization: <input type="checkbox"/> New authorization <input type="checkbox"/> Change payment amount <input type="checkbox"/> Change payment date <input type="checkbox"/> Change banking information <input type="checkbox"/> Discontinue electronic payment			
Last Name		First Name	
Address			
City		State	Zip
Email			
Date of first payment: ____/____/____ (mm//dd/yy)	Frequency of payment: (please check only one) <input type="checkbox"/> Monthly on the 1 <sup>st</sup> <input type="checkbox"/> Monthly on the 9 <sup>th</sup> <input type="checkbox"/> Monthly on the _____ (indicate a date between the 2 <sup>nd</sup> – 9 <sup>th</sup> only)		Amount of maximum payment: \$ _____
Date of last payment ____/____/____ (mm//dd/yy)			
<b>CHECKING / SAVINGS</b>	Please debit payments from my (check one): <input type="checkbox"/> Savings Account (contact your financial institution for Routing #) <input type="checkbox"/> Checking Account (attach a voided check below*)		Routing Number: _____ <b>Valid Routing # must start with 0, 1, 2, or 3</b>  Account Number: _____ <small>                     ⑆ 23456789 ⑆ 23 23456 ⑆ 000 ⑆                      └──────────┘ └──────────┘ └──────────┘                      Routing Number      Account Number      Check Number                 </small>
	I authorize the above organization 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: _____

**If using a checking account, please attach a voided check\* at the bottom of this page.**

**\*Note: A voided check is only required for NEW authorizations or if using a NEW checking account that is not already on file with CECC.**

**\*\*A new authorization form is required for each session due to changing first/last dates and/or tuition rates.**