

## Kids' Club Tuition Payment Options

Starting **June 22, 2016**, **Kids' Club** will be introducing a convenient new service called EZ-EFT that makes it easy for you to pay your child care fee automatically – at absolutely no cost to you. The simple authorization form allows us to bill your financial institution (**or credit card**) on the due date. There is no need for you to write checks, remember to drop off (**or mail**) them, or worry about late fees. Your record of payment will be listed each month on your banking or credit card statement.

Getting started is easy. Simply complete the authorization form included here, or pick up a form at the front desk. Attach a voided check to the form and return it to us. **If you prefer to pay by credit card, just include the account number and expiration date.**

What about security? The service uses the Federal Reserve's electronic payment network used by financial institutions nationwide, so it is absolutely secure. Consumer safeguard regulations for electronic payments are even more stringent than when you write a check.

With your busy schedule, it's nice to know that you will have one less task to perform each month with absolutely no cost or effort on your part. Sign up for EZ-EFT today!

### EZ-EFT Authorization Form

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I hereby authorize

\_\_\_\_\_  
(Print name of your financial institution.)

to make my periodic payment on my behalf from the checking, savings or credit account listed below and transfer it to **Kids' Club**.

CHOOSE ONE:

\_\_\_\_\_ Checking Account Transfer  
(Voided check must be attached.)

\_\_\_\_\_ Savings Account Transfer

\_\_\_\_\_  
(Savings Account Number)

\_\_\_\_\_ Credit Card Charge

\_\_\_ Visa                      \_\_\_ AMEX  
\_\_\_ MasterCard            \_\_\_ Discover

\_\_\_\_\_  
(Credit Card Number)

\_\_\_\_\_/\_\_\_\_\_(month/year)  
(Expiration Date)

I understand that I am in full control of my payment, and if at any time I decide to make any changes or discontinue this service, I will notify **Kids' Club**. Change of payment method will not affect the terms of my contract.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_