



**YMCA OF THE NORTH SHORE
CHILD CARE PROGRAM
ELECTRONIC PAYMENT (E-PAY) AUTHORIZATION**

Electronic Payment (E-Pay) Authorization Agreement

I (we) hereby authorize the YMCA of the North Shore to initiate weekly recurring debit entries/credit card charges to the below referenced bank/credit card account. I (we) understand that the weekly debits/charges will be based on fees that are due and payable at the time of the transaction and prior to services rendered. Should any preauthorized withdrawal not be honored by my (our) bank/credit card company when received by them, then it is understood that the payment is to be made by me (us) in the amount owed.

Child's Name: _____

Program attending: _____

Bank Account E-Payment:

Checking Savings

Bank Customer Name _____

Bank Customer Address _____

City _____ State _____ Zip _____

Bank Customer Phone _____

Bank Customer E-mail _____

Bank Name _____

Routing Transit Number (nine digits) _____

Account Number* _____

*Please attach a voided check – deposit slips not accepted

Credit Card E-Payment:

Visa MasterCard

American Express Discover

Card Holder Name _____

Card Holder Address _____

City _____ State _____ Zip _____

Card Holder Phone _____

Card Holder E-mail _____

Credit Card Name _____

Account Number _____

_____/_____/____ _____
Expiration Date CVV Number**

**Visa, MasterCard & Discover: 3 digit security number on back of card

**American Express: 4 digit security number on front of card

The YMCA reserves the right to extend the above credit card expiration date, upon its expiration.

- I (we) authorize the YMCA to withdraw sufficient funds to pay my (our) regular weekly child care tuition and/or other related fees which are due and payable. I (we) understand that the YMCA may, at its discretion, adjust the debits/charges according to the fees incurred.
- Should a draft not be honored by my (our) bank/credit card for any reason, I (we) understand that the YMCA will automatically resubmit the draft for payment.
- I (we) understand that after two unpaid drafts, the YMCA will immediately terminate child care until I (we) have brought all payments up to date.
- I (we) understand that if I (we) wish to terminate or change my (our) E-pay, I must give the YMCA a two week written notice.

Signature _____

Date _____