Automatic Withdrawal Agreement Form 2020 - 2021

430 N. 2nd Street
Brawley, CA 92227
(760) 344-3911 phone
(760) 344-5864 fax
brawleychristian.com

STUDENT NAME: _____

Authorization Terms

- I hereby authorize Brawley Christian Academy (BCA) to initiate automatic withdrawals from my account from the financial institution written below. Charges scheduled on weekends or holidays will be initiated on the closest working business day.
- I authorize BCA to charge a $15.00 fee for any insufficient funds, and agree to make full payment for tuition and applicable late fees. Payments for tuition not collected through automatic withdrawal, and late fees must be made to the main office within 5 business days.
- Further, I agree not to hold BCA responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution, or due to an error on the part of my financial institution in withdrawing funds from my account.
- This agreement will remain in effect until: 1. BCA receives a written notice of cancellation from me or my financial institution; 2. I submit a new withdrawal agreement (and contract); 3. School contract (financial) obligations have been fulfilled.

Account Information

To complete this form, please provide (1) of the items below:

1. **A voided personal check**
2. **A counter check (purchased at your bank)**

Withdraw funds from: ☐ **Checking** ☐ **Savings**

Withdraw funds on: ☐ **5th** ☐ **20th**

***Authorized Signature (Primary)** _____ **Date:** _____

***Authorized Signature (Joint)** _____ **Date:** _____

**By signing I agree to abide by all the terms and conditions outlined above.*

OFFICE USE BELOW

50cc	**12mo**	**308nfr**	**267fr**
60cc	**10mo**	**370nfr**	**320fr**

Total:

(Revised 3/20)