

ELECTRONIC FUNDS TRANSFER AUTHORIZATION

If you elect to sign up for EFT, preschool payments for the 2026-2027 school year will be collected through automatic debits of your checking account each month. All payments will be debited from the checking account on the 1st day of each month starting September and running through May. If the 1st of the month falls on a weekend or holiday, payments will be withdrawn on the next business day.

(Please double check numbers. If tuition is returned due to incorrect numbers, a \$30 return fee will be added)

I, _____, give Robin MacLeod of Little Learner's Preschool, authorization to debit my checking account # _____
Bank Name _____ Routing # _____ in
the amount of \$ _____ each month on the first day of the month starting
in September 2026 and ending May 2027 for my Student _____.

By signing this authorization, I agree to the terms set forth. I agree that funds will be available for withdrawal on the first of each month. If a payment does not go through and is not authorized, I agree to pay the return check fee of \$30.00 per transaction. If there are any changes in my account information, I agree that I am responsible for letting Little Learner's Preschool know as soon as possible. All payments are submitted for processing 5 business days before the 1st of each month.

Signature: _____