

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT AND CREDIT CARD

I (we) hereby authorize Wellspring Early Learning LLC to initiate credit card charges to the below-referenced credit card account **(Section A)** OR, initiate debit entries to my (our) checking or savings account, indicated below **(Section B)**. To properly affect the cancellation of this agreement, I (we) are required to give 30 days written notice. I (we) authorize automatic payments to be made the 1st and the 15th (or closest weekday) of each month to cover any outstanding account balance. Account balances may include tuition charges and fees as described on Wellspring's website or parent handbook. If a credit card is charged, a 3% processing fee will be assessed. Please see the Parent Handbook for me details regarding payment information.

COMPLETE BOTH SECTIONS

SECTION A (Credit Card)

Cardholder Name	Phone #		
Cardholder Address	City	State	Zip
Card Number	Expiration Date	CVV	
Cardholder Signature	Date		

SECTION B (Bank Account)

Your Name	Phone#			
Address	City	State	Zip	
Bank or Credit Union Name	Bank or Credit Union Address	City	State	Zip
Routing Transit Number (see sample below)	Account Number (see sample below)	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	
Authorized Signature	Date			

The diagram shows a check with the following fields and labels:

- Your Name**
- Your Address**
- DATE**
- 1035** (in the top right corner)
- PAY TO THE ORDER OF**
- \$** (followed by a box for the amount)
- DOLLARS**
- Your Bank Name**
- MEMO**
- 123456789** (Routing Number, highlighted in red)
- 987654321** (Account Number, highlighted in green)
- 1035** (Check Number, highlighted in green)