

# ACH Monthly Withdrawal Authorization

Starting 2019/2020 School Year

Authorization Type:  New Authorization  Change Account (please choose one)

## Step 1

Name (as shown on bank account)	
Home Address	
Daytime Telephone Number	
Bank Name	
Bank Routing Number (nine digits)	
Bank Account Number	
Type of Account	Savings <input type="checkbox"/> Checking <input type="checkbox"/>

## Step 2

Date of Withdrawal in Each Month (please choose one)	10 <sup>th</sup> <input type="checkbox"/>	25 <sup>th</sup> <input type="checkbox"/>
Number of payments (please choose one) 12 payments starting in June 10 payments starting in August (new families must choose 10 <sup>th</sup> if selecting this option)	10 payments <input type="checkbox"/>	12 payments <input type="checkbox"/>

**NOTE: For ACH payment methods, the school charges a one-time ACH Annual Processing Fee of \$20 per student.**

## Step 3

The tuition payment will be drawn on the day of the month specified above. If the day falls on a weekend or holiday, the funds will be withdrawn the next business day.

I hereby authorize the Rapid City Catholic School System to make a monthly withdrawal until tuition is paid in full. I **acknowledge** that any monthly payments not cleared for any reason will be assessed a **\$20.00** processing fee.

\_\_\_\_\_  
Signature of account holder

\_\_\_\_\_  
Date

Mail or deliver form to 424 Fairmont Blvd. Rapid City, SD 57701. If you would like help completing this form, please contact the Business Office at 348-1477 x-117



A voided check is required for all **new** or **changed** accounts. Please attach the voided check to this form.