StoneBridge School
ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION FORM

Parents may elect one of three options for quarterly or monthly payments:

Payments are due on the 20th of each month. A $15 monthly service fee is charged for installment plans (1) and (2) and a $15 quarterly service fee is charged for installment plan (3). Such fees are to be included with the payment. Installment plans are payable only by EFT. This Electronic Funds Transfer Authorization Form ("this Form") must be completed and returned to StoneBridge School before any preauthorized debits may occur.

PAYMENT INFORMATION

EFT Frequency:

1. ☐ 10 monthly payments, beginning July 20, 2012 and ending April 20, 2013
2. ☐ 12 monthly payments, beginning July 20, 2012 and ending June 20, 2013
3. ☐ 4 quarterly payments, beginning July 20, 2012 and ending April 20, 2013

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☐ Tuition $_____ ☐ Bus $_____
☐ Service Fee $_____ ☐ Extended care $_____
☐ Gift to SBS $_____ ☐ Facility Fee $_____

Total EFT Amount $_____

ACCOUNT INFORMATION

( ) **CHECKING** ( ) **SAVINGS**

Financial Institution: _____ ("the Financial Institution")
Routing Number:_____Account Number: _____

For checking accounts, please attach a "Voided" check to this Form (NOT A DEPOSIT SLIP.) For savings accounts, please contact the Financial Institution to obtain the correct routing number.

I/We authorize StoneBridge School to debit the Financial Institution and account number designated above. I/We also authorize StoneBridge School to obtain information from the Financial Institution pertaining to this Form, and to credit my/our account if a payment is debited in error. I/We acknowledge that the origination of EFT transactions from my/our account must comply with the provisions of U. S. law. I/We recognize that if I/we fail to provide complete or accurate information on this Form, the processing of this Form may be delayed and/or my/our preauthorized debit may be erroneously transferred. In the event that funds are erroneously transferred due to my/our failure to provide complete or accurate information on this Form, I/we hereby hold StoneBridge School harmless for the recovery of such erroneous transfers, not withstanding any reasonable attempts made by StoneBridge School to correct such errors.

I/We also understand that: (a) StoneBridge School will charge a $50 return draft fee for any EFT item returned as insufficient funds; (b) **StoneBridge School will reattempt the EFT 10 days from the first unsuccessful attempt**; (c) if the second EFT is unsuccessful, tuition will be billed to my/our SBS account and late fees will apply as per the SBS Enrollment Agreement.

This authorization is to remain in full force and effect until StoneBridge School has received written notification from me/us of its termination in such time and in such manner as to afford StoneBridge School and the Financial Institution a reasonable opportunity to act on it.

_____ _____
(Print Name) (Signature)

_____ _____
(ID Number or SSN) (Date)