

Buffalo Grove Park District Clubhouse Payment Agreement Form 2024 - 2025

Child's Name:	School:		
Address:	City:	Zip:	
am responsible for the monthly tuition amount \$ business day of each month. In the event of any absen- time reserved, not actual time spent at the program.	, which will ces during program hours/c	be debited in nine activities, I will be	installments on the last responsible for fees for
Credit Card Automatic Payment Agreement (only	y select one option):		
All declined payments incur a \$25 decline fee. If a parent or guard the delinquency, the child's participation in the program will be temp declined, the payment must be resubmitted using cash, a money order.	orarily suspended until the accoun	it is settled in full. Shoul	d a credit card payment be
f you opt to terminate your credit card automatic payment arrangeme update the expiration date, or wish to switch to a different credit cabusiness days prior to the posting date. These forms can be obtained	rd, you are required to complete	a new Payment Agreer	ment Form no later than five
Credit Card Number:		Expiration Date:	
Cardholder Name:		CVV Code:	
(we) give permission for the Buffalo Grove Park District to cha month, beginning on:	arge the amount from the accou		The state of the s
Credit Card Tuition Payment Authorized Signature:		Date: _	
Direct Debit Tuition Payment Agreement - Please A	Attach A Voided Blank Check		
All declined payments are subject to a \$25 decline fee. Should a pa week of the delinquency, the child will be temporarily removed from			submit payment within one
f you wish to switch your payment method from automatic withdre Agreement Form at least five business days before the posting date.			
(or we) hereby authorize the Buffalo Grove Park District to initiate of and authorize the bank named below, hereinafter referred to as the "I Grove Park District to initiate credits to my (or our) account for the pusuch corrections. This authorization shall remain in full force and emotification of its termination, allowing reasonable time for action belowed.	nstitution," to debit the same said ourpose of rectifying any errors, and fect until the Buffalo Grove Park	account. Furthermore, I d I (or we) authorize the District and the "Institu	(or we) authorize the Buffalo e "Institution" to execute any ution" have received written
Direct Debit Information: Check bank account you want your	payment withdrawn from:	Checking	Savings
Name(s) on Bank Account:	Bank Account Numb	oer:	
Bank Transit ABA (Routing Number):			
(we) give permission for the Buffalo Grove Park District to cho month, beginning on:			
Direct Debit Tuition Payment Authorized Signature:		Date:	

Due to internet security precautions, credit card and payment information are not accepted via email.