



*Hop aboard the Tuition Express
and never write a check again!*

As your childcare provider, we are excited to offer you the convenience of automatic tuition payments through Tuition Express. You'll no longer need to write a check or remember your checkbook when you're picking up your child at the end of a hectic day. Your payment will be safely and securely processed by Tuition Express, giving you peace of mind that your tuition has been paid on time! It's easy to enroll and even easier to participate. You'll be joining tens of thousands of parents nationwide who enjoy the ease and convenience of Tuition Express.

To learn more about Tuition Express, automatic payment notifications or to review your payment history, please visit www.tuitionexpress.com

For Bank Account Authorization, complete this side and return to center management.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION

I (we) authorize _____, (called "CENTER" in this Authorization) to initiate debit entries to my (our) Checking or Savings Account indicated below at the depository financial institution indicated below (called "DEPOSITORY" in this Authorization). I (we) authorize CENTER to withdraw sufficient funds to pay my (our) regular childcare tuition and/or other childcare related fees that are due and payable. I (we) authorize CENTER to use the third party sender, Tuition Express* to process all payments. I (we) acknowledge that the origination of Automated Clearing House (ACH) transactions to my (our) account must comply with the provisions of United States Law

Credit Union Members: Please contact your Credit Union to verify account and routing numbers for automatic payments.

Your Name _____		Phone # _____	DEPOSITORY - Bank or Credit Union Name _____		
Address _____		Bank or Credit Union Address _____			
City _____	State _____	Zip _____	City _____	State _____	Zip _____
Routing Transit Number (see sample below) _____		Account Number (see sample below) _____			
Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings					

This authorization will remain in full force and effect until I (we) notify the CENTER in writing of its termination in such time and in such manner as to afford Tuition Express and DEPOSITORY a reasonable opportunity to act upon it. Notices must be received at a minimum of 5 business days in advance of the termination date.

Signature _____ Date _____

PLEASE KEEP A COPY OF THIS AUTHORIZATION FOR YOUR RECORDS

*Tuition Express is an assumed business name of Blum Investment Group, Inc

(Please attach a copy of a voided check below - deposit slips not accepted)

John Smith
Sally A. Smith
123 Main Street
Anytown, OR 97504

1420

DATE _____

PAY TO THE ORDER OF _____ \$ 14.20

Center

Anytown Bank
Anytown, OR 97504

Memo _____

⑆ 105742104⑆ 5782451⑆ 1420

Routing Transit Number Account Number Check Number