



Authorization Agreement for Bank Draft Payments

Macon Road Baptist School

2019-2020

I authorize Macon Road Baptist School to initiate debit entries to my checking account or savings account below and allow their bank to debit my account for tuition and related fees.

Bank Name _____ Bank Routing Number _____

Name on Account _____ My Account No. _____

Account Type (select one) Checking Savings

This authority is to remain in force until the bank has received written notification from me of its termination in such time and such manner as to afford the bank a reasonable opportunity to act on it. A customer has the right to stop payment of a debit entry by notifying the school prior to charging their account. If Macon Road Baptist School initiates an erroneous debit entry to a customer's account, the customer shall have the right to have the amount of the entry credited to his/her account by the school. If, within 15 calendar days following the date on which the school sent to the customer a statement of account or written notice pertaining to the entry or 46 days after posting, whichever occurs first, the customer shall have sent to the school a written notice identifying the entry, stating that the entry was in error and requesting the school to credit the amount to his/her account.

Signed _____ Date _____

Name of Student (please print) _____

Please complete this form and fax to 901.867.1162 or email to mmoak@maconroad.org