

**Authorization for Electronic Withdrawal of Tuition
for Notre Dame School**

Office Use only:

Envelope #
Date

Processing information (please check one)

- New authorization
- Change financial institution and/or account
- Discontinue electronic contribution

Staple
Voided Check
Here

Parishioner information

Name:

Address:

City, State, Zip:

Account information

Account Type (check one):	
<input type="checkbox"/> Checking Account (please attach a voided check)	<input type="checkbox"/> Savings Account (please attach a voided savings deposit slip)
Routing #:	Account #:

Effective Date: August 15 Amount \$ _____

Authorized signature on my account

Date