



Tuition Payment Authorization Form

Complete This Section for Enrollment: (Please print)

Last Name—(Parent)	First Name—(Parent)	Student Name
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Check the appropriate box: New enrollment/authorization; Change in authorized amount; Change in account

Complete This Section for Instructional Fee/Tuition Payments:

Payment Calculation:

Total K-8 Instructional Fee (\$325 x # of students)	\$ _____
Total Tuition	+ \$ _____
Less Registration Fee (K-8) PAID	- \$ _____
Balance Due	\$ _____

- Annual (one-time) Payment—due Aug. 17, 2018 (2% Discount given)
Non-Member only \$ _____
- Quarterly Payments—due Aug. 17, Oct. 26, Jan. 7, Mar. 15 \$ _____
- Monthly Payments—Total Balance due divided by:

9 monthly payments:	\$ _____ per mo.
or 10 monthly payments:	\$ _____ per mo.
or 11 monthly payments:	\$ _____ per mo.
or 12 monthly payments:	\$ _____ per mo.

Date of first payment: ____ (day) _____ (month—July for 12 month plan)
 Date of last payment: ____ (day) _____ (month)

Checking/Savings

- All monthly payments must be automatic withdrawal and requires you to fill out the section below.
- Please debit my tuition payment from my (check one):

<input type="checkbox"/> Checking Account	Routing Number: _____
(attach voided check or deposit slip)	Valid Routing # must start with 0,1,2, or 3
<input type="checkbox"/> Savings Account	Account Number: _____
(attach deposit slip)	

I authorize Immanuel Lutheran School to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.

Authorized Signature: _____ Date: _____