Automated Payment Processing

Procare SOLUTIONS

Safe. Convenient. Easy.

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT AND CREDIT CARD

I (we) hereby authorize (business name) _____Sylvania Community Services_____ to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.
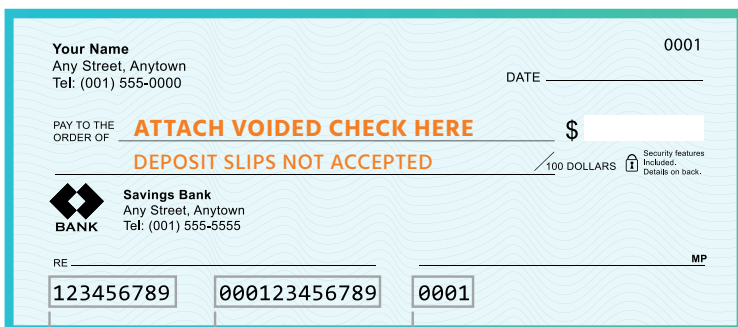
Visa and Mastercard

==COMPLETE ONE SECTION ONLY==

SECTION A (Credit Card)

Cardholder Name	Phone #
Cardholder Address	City State Zip
Account Number	Expiration Date
Cardholder Signature	Date

SECTION B (Bank Account)

Your Name	Phone #
Address	City State Zip
Bank or Credit Union Name Bank or Credit Union Address	City State Zip
Routing Transit Number (see sample below) Account Number (see sample below)	☐ Checking ☐ Savings
Authorized Signature	Date

Your Name
Any Street, Anytown
Tel: (001) 555-0000

0001

DATE _____

PAY TO THE ORDER OF   **ATTACH VOIDED CHECK HERE** $ _____

DEPOSIT SLIPS NOT ACCEPTED   /100 DOLLARS   Security features Included. Details on back.

Savings Bank
Any Street, Anytown
Tel: (001) 555-5555
BANK

RE _____   MP

123456789   000123456789   0001

ROUTING NUMBER   ACCOUNT NUMBER   CHECK NUMBER

FOR OFFICIAL USE ONLY

_____
Date Received

_____
Employee Signature

800.338.3884 • **procaresoftware.com**
© Copyright 2020 Procare Software®, LLC