ATTERCLIFFE CANADIAN REFORMED ELEMENTARY SCHOOL

85785 CANBOROUGH RD., R.R.#1 DUNNVILLE ON N1A 2W1

Pre-Authorized Payment Request Form

Member Information

Name	Address
Email	Phone

Payment Information

Amount				
	Tuition		Start Date	
	Membership		End Date	None
	Pre-tuition		Process Date	15th (default)

I hereby authorize Attercliffe Canadian Reformed Elementary School (ACRES) to withdraw the regular monthly payment as indicated above. Should I wish to change or cancel the payment the ACRES treasurer should be notified in writing prior to the first day of the month of withdrawal.

Please attach a VOID cheque or fill in account details below.

Transit	Bank ID	Account Number	Signature	Date