



Dear Parents,

We would deeply appreciate it if you can please fill the information below to process the payments for the program fees. Please know that we understand this information is extremely sensitive and confidential. We will take great care to keep it that way and will turn it in immediately to our CFO for processing once you submit the form.

You understand that, if you do not fill this form, there will be an additional credit card transaction fee added to your account and before processing the tuition fee amount.

**Name of Student:**

\_\_\_\_\_

Program your child currently attends (Please circle one)

**AFTERSCHOOL**

**PRESCHOOL**

**TODDLER**

I (we) \_\_\_\_\_,

authorize **India Community Center** to electronically debit my/our

**CHECKING ACCOUNT**

**SAVING ACCOUNT** (circle one)

Bank Name \_\_\_\_\_

Bank Routing Number \_\_\_\_\_

Bank Account Number \_\_\_\_\_

**ATTACH VOIDED CHECK HERE**

2400

\_\_\_\_ 19 \_\_\_\_ 91-548/1221

**PAY TO THE ORDER OF** \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ **DOLLARS**

**FOR** \_\_\_\_\_

⑆ 22105278⑆ 6724301068⑆ 2400⑆

Routing Number      Account Number      Check Number