



**Authorization for Electronic Funds Transfer  
(EFT) for Summer Child Care Payments**

Name/s of Children Served: \_\_\_\_\_ Member ID: \_\_\_\_\_

Is the Primary Member name the same as the name on the account we will be drafting from? (Circle one) YES NO

I hereby authorize my financial institution to honor pre-authorized drafts drawn by the YMCA on my account for child care payments and when my financial institution honors such drafts by charging my account this shall constitute my receipt for payment. I further stipulate to the following conditions:

- **I understand that enrollment in YMCA Child Care is continuous for the specified enrollment period (school year and summer are considered separate enrollment periods) and that drafts will continue until I give notice as indicated below to change or terminate participation.**
- **I understand that I must give the YMCA adequate notice prior to draft to cancel program registration.** Cancellation of services must be in writing and received the Monday before each new session. A \$20 minimum processing fee as well as fees for the number of days served (if any) will be charged for late cancellations.
- **I understand that if I choose to draft on an alternate date from the due date, it must be prior to the due date.**
- **I understand I am personally responsible for any draft payments** not honored by my financial institution or other fees for any reason and agree to pay a \$15.00 service charge on ALL returned drafts.
- **I understand that returned draft payments are in addition to child care late fees (\$25 between 1-5 days—care will be discontinued after the 5<sup>th</sup> day.)**
- **I understand that the YMCA may increase program fees** and will notify me in advance of any increases to my monthly draft amount.

*I hereby acknowledge I have read and agree to the conditions stated above.*

\_\_\_\_\_  
Signature of **Holder** of Bank Account

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name on Account **PLEASE PRINT**

\_\_\_\_\_  
Financial Institution Name

\_\_\_\_\_  
Bank Transit/Routing Number

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

Drafting from:  Checking  Savings  
 Visa  MC  Discover

\_\_\_\_\_  
Expiration Date (Debit/Credit Transactions Only)

**Payment Schedule Options (Choose One)**

- Payments made on due dates (June 21<sup>st</sup>, July 5<sup>th</sup> August 2<sup>nd</sup>)       Payments made on day (prior month)\_\_\_\_\_

**A VOIDED check OR COPY of credit card is required with all bank draft applications.**

**Attach Here**