

RECURRING PAYMENT PLAN AUTHORIZATION FORM: ACH

ELECTRONIC FUNDS TRANSFER AUTHORIZATION (Please Print)

I authorize Casa de Corazón, to initiate either an electronic debit, or create and process a demand draft against my Checking or Savings Account for the purpose of collecting childcare related payments. I authorize Casa de Corazón to withdraw sufficient funds to pay my regular childcare fees that are due and payable. I authorize Casa de Corazón to use the third party sender, Authorize.net, to process all payments. I acknowledge that the origination of ACH transactions to my account must comply with the provisioning of United States law.

Account Holder's Name:

Phone:

Email:

Children Names (if applicable):

Please enter children names if the account holder's last name is different.

Account Holder's Address:

City:

State:

ZIP Code:

Bank/Credit Union Name:

Bank/Credit Union Address:

City:

State:

ZIP Code:

Bank Account Type: Checking Savings Business Checking

Routing Number:

(See Sample Below)

Account Number:

(See Sample Below)

This authorization will remain in full force and effect until I notify Casa de Corazón in writing of its termination. Notification must be received 5 business days in advance of termination date to permit Authorize.net and your bank reasonable time to act upon it.

Signature:

Date:

PLEASE KEEP A COPY OF THIS AUTHORIZATION FOR YOUR RECORDS

(Please attach a copy of a voided check below - deposit slips not accepted)

_____ Dollars

Bank Name
Street Address
City, State, ZIP

⑆044 204 224⑆ 02999999999⑆00403

This is the location of the 9 digit Transit Routing Number for your Bank.

This is where you will find your account number.

PRIVACY POLICY

This Privacy Policy is provided to inform you about the payment information Casa de Corazon (“Casa,” “we,” “our” or “us”) collects from you. The information in this Privacy Policy is intended to be supplemental to any other policy or agreement you have with us. If you have any questions or comments about this Privacy Policy, please contact us at accounting@casaeearlylearning.com.

CONSENT

By filling out this payment form you are consenting to the collection, use and transmission (collectively, “Use”) of your credit or debit card information. If you do not consent, do not fill this information and contact us to setup an alternate payment arrangement.

PERSONALLY IDENTIFIABLE INFORMATION (“PII”)

PII is information that can be used to identify you individually. PII includes, but it is not limited to, your name, your email, phone and credit/debit card information.

USE OF PERSONALLY IDENTIFIABLE INFORMATION

We only use your PII to process your payment for our services.

SAFEGUARDING YOUR PII

We maintain reasonable administrative, physical, and technological safety measures to protect your PII. However, no file system is immune from attack and, therefore, we cannot guarantee that your PII will not be disclosed, misused or lost by accident.

DISCLOSURE TO THIRD PARTIES

We reserve the right to disclose PII to any successor-in-interest of ours, such as a company that acquires us. We will disclose PII to law enforcement as required or permitted by law.

ARE CHANGES MADE TO THIS PRIVACY POLICY?

Yes. We reserve the right to modify, add or remove any terms and conditions in this Privacy Policy without prior notice or liability to you. Any changes we make will be effective immediately.