

**ACH DIRECT DEBIT OF TUITION PAYMENT
AUTHORIZATION AGREEMENT**

I hereby authorize Five Oaks Academy, Inc., hereinafter called FOA, to initiate debit entries or such adjusting entries, either debit or credit which are necessary for corrections, to my Checking _____ or Savings _____ (please check) account indicated below and the financial institution named below to debit (or credit) the same to such account.

Amount to be debited: _____ (This amt will equal your monthly tuition amount)

Date to be debited: First Business day of each month

Date of initial debit: August 1, 2012

Date of final debit: July 1, 2013

Financial Inst Name	City	State
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Transit / Routing #	Account#
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This authority is to remain in full force and effect until FOA has received written notification from me of its termination in such time and in such manner as to afford FOA a reasonable opportunity to act on it or until the date of the final debit, which ever comes first.

Name

Address

E-mail Address	Day Time Phone #
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Signature	Date
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*****Please attach a copy of a voided check**