

410 North Scugog Court, Bowmanville, ON LIC 6TI 905-623-587I office@knoxchristian.com knoxchristian.com



WE ARE A COMMUNITY OF LEARNERS WHO LOVE GOD AND SERVE OTHERS

Knox Christian School Society (KCSS) now has the option for you to pay your tuition using Preauthorized Debit (PAD) through CIBC. In order to do this we need this form completed and signed along with a VOID cheque. If you do not have a cheque, please obtain a direct deposit notification form from your bank. If you have any questions please contact finance@knoxchristian.com.

I/we authorize Knox Christian School Society and CIBC to begin deductions as per my instructions for monthly recurring payments and/or one time payments, for payments of charges arising under my/our KCSS account. Regular monthly payments will be debited on the 15th day of each month.

This authority is to remain in effect until KCSS has received written notification from you of its change or termination. This notification must be received at least fifteen (15) days before the next debit is scheduled. To obtain a sample cancellation form, or for more information on your right to cancel a PAD agreement, you may contact your financial institution or by visiting www.cdnpay.ca.

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on your recourse right, you may contact your financial institution or visit www.cdnpay.ca.

| PLEASE PRINT | | DATE: |
|--|-----------------------------|---|
| Name(s) | | |
| These services are for (please x ap | opropriate classification) | Personal Business |
| Address: | | |
| City/Town: | Prov: | Postal Code: |
| Phone Number:(Home) | (| Cell.) |
| (Bus.) | | (Ext.) |
| Financial Institution (FI) | | |
| FI Account Number:FI Transit Number: | | mber: |
| Address: | | (Branch-5 digits; FI-3 digits) |
| City/Town | Prov: | Postal Code: |
| Authorized signature(s): | | |
| I authorize Knox Christian Schoo | ol to debit my account (ple | ase X appropriate payment schedule): |
| Annually - One Payment Oct | : 15, 2024 Semi-a n | nually: Sept 15, 2024 & Feb 15, 2025 |
| 10 months: 1/10th on the 1 | 5th of each month Septem | ber 2024 to June 2025 |
| 12 months: 1/12 on the 15th | of each month August 20 | 24 to July 2025 |