



PRE-AUTHORIZED CREDIT/DEBIT ENROLLMENT FORM

Office Use:
Template ID: _____
Entered: _____
Withdrawn: _____

Please complete and return to YWCA St. Thomas-Elgin (for verification purposes)

We/I, _____
(Your Name - First and Last)

Address _____

City _____ Province _____ PostalCode _____

Email: _____ Phone (_____) _____

Income tax receipt will be emailed to above stated email, unless otherwise specified.

Withdrawal Policy: All cancellations or reductions in childcare services require a minimum of two weeks written notice. Parents/guardians are required to pay the fees for these two weeks, and may continue to use the childcare services during this two week period. A \$10 administrative fee will be applied to every change made to your child/ren's registration throughout the school year. Refunds will be mailed within 30 days provided all conditions of this contract are met.

Automatic withdrawal will take place on the 1st of each month or the following business day. If you require childcare mid-month, payment must be made upon registration by cash, cheque, credit card or debit to cover the cost of the current month. Part-time/on-call or supplemental withdrawals will be on the 15th of the following month.

HEREBY AUTHORIZE

YWCA St. Thomas-Elgin
16 Mary St. W. St. Thomas, ON N5P 2S3
Ph: 519-631-9800 Fax: 519-631-6411 Email: ywcastthomaselgin@bellnet.ca

\$50 advance registration fee will apply		
Date Paid:	_____	
Method of Payment:	MC, Visa, Cheque, Debit, Cash	
Card Number	E.D.	CSV

TO CHARGE MY CREDIT CARD

- VISA
- MASTERCARD

_____	_____	_____
Card Number	Expiry Date (MM/YY)	CSV# (on back of card)

For the purpose of childcare, the amount of \$_____/month will be charged to your credit card beginning on _____

Before School After School Before & After School Part-time/On-call

Signature _____ Date _____

OR

TO DEBIT MY ACCOUNT

Please attach a void blank cheque or a Preauthorized Payment Instruction form from your banking institution if choosing this option. *(If you are a **RETURNING** family and your banking information has not changed from last school year, this will not be necessary.)*

For the purpose of childcare, the amount of \$_____/month will be charged to your account beginning on _____

Before School After School Before & After School Part-time/On-call

Signature _____ Date _____

<i>To be completed by School Age Childcare Manager/Coordinator</i>		
School Name: _____	Official Start Date: _____	
Child's Name _____	Grade _____	Monthly Fee _____
Child's Name _____	Grade _____	Monthly Fee _____
Child's Name _____	Grade _____	Monthly Fee _____
Authorized by YWCA staff: _____	Date _____	