

O.K.C.S. SOCIETY 2024/25 PAYMENT FORM

FAMILY NAME: _____

- We are making one full payment of fees, payable by cash, cheque or e-transfer by **AUGUST 15, 2024**
- We authorize O.K.C.S. Society to withdraw funds from our Bank account as per the information entered below.
- We wish to make other lump sum payment(s) by cheque, cash or e-transfer as per the **FOLLOWING DATES**

AND AMOUNTS: _____

**** Accompanying this form must be a VOID cheque or Bank document clearly identifying your direct debit information
OR CHECK THE FOLLOWING BOX**

- No change in Bank account information from last year

Authorization for Pre-Authorized Debit (PAD) for **TUITION/BUS FEES**

Name: _____ Contact Phone #: _____

I/We authorize Olds Koinonia Christian School Society to debit my/our bank account for the amount of \$ _____ on the 1st 15th 20th 31st of each month starting _____ 2023 and ending on _____ 20__

I/We authorize Olds Koinonia Christian School Society to debit my/our bank account identified for a one-time payment of \$ _____ on the ____ of _____ 20__

This amount shall be applied to the **fees** charged to my account with Olds Koinonia Christian School Society

Signature: _____ Date: _____

Authorization for Pre-Authorized Debit (PAD) for **DONATION**

Name: _____ Contact Phone #: _____

I/We authorize Olds Koinonia Christian School Society to debit my/our bank for the amount of \$ _____ on the 1st 15th 20th 31st of each month starting _____ 20__ and ending on _____ 20__

I/We authorize Olds Koinonia Christian School Society to debit my/our bank account for a one-time payment of

\$ _____ on the _____ of _____ 20__

This amount shall be received as a **donation** to Olds Koinonia Christian School Society

Signature: _____ Date: _____

You, the Payer, may revoke your authorization at any time, subject to providing notice of 30 days. To obtain a sample cancellation form, or for more information on your rights to cancel a PAD agreement, contact your financial institution or visit www.payments.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 rights, contact your financial institution or visit www.payments