FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

PAYMENT OPTIONS AND TERMS
School Age/ Day Camp

Primary Account Holder's Name (please print): _____
First M.I. Last Date of Birth

Individual authorized to make account changes: _____
First M.I. Last

NAME OF CHILD: _____

☐ **Weekly EFT – Mondays only (bank charges may take up to 14 days)**

I hereby authorize the YMCA of Greater Grand Rapids to debit my account indicated above. I understand that the debit will be initiated on the due date shown below. This authority agreement is to remain in effect on a continuous basis, unless the parent wished to terminate child care services. The YMCA of Greater Grand Rapids will continue debiting my account on a week-to-week basis. **If I wish to discontinue my child care with the YMCA, I must notify the YMCA in writting 14 days before my next draft date.** Should my bank, for any reason, not honor any debit, I am responsible for the payment, plus a service charge of $25 applied by the YMCA. This is in addition to any fees or penalties I may incur by my bank or financial institution. I understand that this is my responsibility to notify the YMCA in writing should I change financial institutions, get a new credit card, and/or make changes to my account at any time.

_____ _____ _____
Parent/ Guardian Signature Date Staff Initials

Please read the following:

1. The YMCA of Greater Grand Rapids Child Care Financial Agreement is a continuous payment plan. I understand that this payment plan will remain in effect for as long as I have my child enrolled in the YMCA Child Care Program, or until the ACH/ credit card is cancelled or the authorization granted to the YMCA has been revoked.
2. Failure to keep your account current will result in suspension of **all YMCA services** until the balance is paid.
3. Full weekly tuition is due regardless of absence.
4. Your child care account will accrue a $1.00 late fee per minute after the program closes and your child is still with us.
5. There is a **$25.00** service charge for all returns. The YMCA has the option to request cash payment.
6. **In the case of a withdrawal from the program, written notice is required two weeks (14 days) prior.**
7. The YMCA can discontinue child care services at any time without prior notice.
8. In the event that a balance is due, the YMCA has the right to charge the bank account or credit card that is on file.

PAYMENT TERMS

Begins on _____ / _____ / _____

$ _____ Weekly Tuition

$ _____ **Total Weekly EFT**

My child care tuition will be granted as continuous until the time that I decide to terminate. I agree if for any reason I wish to change the status of my tuition, I must give the YMCA written notice 14 days in advance of my EFT date. I understand that the YMCA reserves the right to adjust tuition rates as necessary, which I agree to pay upon at least 14 days advance written notice. I also understand that the YMCA will take necessary steps to collect the tuition fees if necessary, including potentially sending my account to collection.

FOR SAFETY AND SECURITY, PLEASE DO NOT SEND FORM ELECTRONICALLY

☐ **Credit/Debit Card** ☐ **Checking** ☐ **Savings** ☐ **Voided Check**

Name on card _____
Credit Card Type _____ Exp. _____ CID # _____
Credit Card # | | | | | | | | | | | | | | | | |

Name on Account _____
Bank _____
Transit / Route # _____
Account # | | | | | | | | | | | | |