## St. Mary's Visitation School 2023 -24 Tuition Payment Program

Name:	Email:
PAYMENT BY DIRECT D	DEBIT:
Ten (10) monthly payments August 2	023– May 2024
Please circle the day of the month you would like the withdrawal to occur:	1 <sup>st</sup> 15 <sup>th</sup> 25 <sup>th</sup>
ACCOUNT INFORMAT	TION:
We participated in the direct debit program last year. Please continue to utilized for the 2022-23 school year.	to use the account information and debit date that was
We participated in the direct debit program last year, but would like to Please note the changes below.	change our account information and/or debit date.
We are new school tuition direct debit customers. Please use the information check is attached.	mation below to set up our account. My/our voided
Account Number:	
Checking Savings (Please circle one)	
Bank Name:	
Bank Routing Number:	
(Please note: If you are a new customer or wish to use a different account the form.)	an last year, please enclose a voided check with this
Name: [	Date:

Please sign, and return this form to Chris Kinzy, St. Mary's Visitation, 1260 Church Street, Elm Grove, WI 53122