St. Michael Catholic School
Tuition & Fees ACH Authorization
2026-2027

ACH AUTHORIZATION

I (we) authorize St. Michael Catholic School and Parish of Lincoln, NE to initiate debit entries to my (our) checking indicated below and the bank named below to debit the same such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

PreK-8th Grade Tuition & Fees

Invoice Total (tuition, fees, snack fee, etc) ÷ 10 months = Monthly Payment

Preschool/Prekindergarten do not have Ed Tech or textbook fee

Monthly Payment: $ _____

Monthly withdrawals will be initiated on or after August 1, 2026

Withdrawals will be made on the 1st or the 15th of each month.

Please indicate which day of the month you prefer by checking the appropriate box below:

☐ **1st of the month**

☐ **15th of the month**

☐ **Check here if your bank information will be the same as last year.**

If your bank information will be changing, please complete the section below.

*__Please attach a voided check*__

Bank Name: _____

City: _____ State: _____ Zip: _____

Routing Number: _____ Account Number: _____

Disclosures

This authority is to remain in full force and effect until St. Michael has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the Parish and Bank a reasonable opportunity to act on it. In no event shall notice be effective with respect to entries processed by the Parish/ School prior to receipt of notice of termination. I understand that I (we) are responsible for all banking fees resulting from insufficient funds being available in my account when the transfer is initiated by the Parish/ School according to my instructions.

I (we) further authorize St. Michael to initiate such credit entries to said account as may be necessary to correct any erroneous debit entries previously initiated thereto. I (we) authorize the Bank to accept and to credit or debit the amount of such entries to my (our) account.

I (we) have the right to stop payment of any entry by notification to Bank prior to the posting of item to the account.

The undersigned hereby agrees that all entries initiated hereunder are to be governed in all respects by the Rules of the National ACH Association as now or hereafter in effect and agrees to be bound thereby.

Name(s):_____

Signed: _____ Date: _____