Automatic Withdrawal Authorization Form - Tuition

☐ New ☐ Change ☐ Cancel

I authorize Fox Communities Credit Union / Holy Spirit Catholic School

To debit my ☐ Checking ☐ Savings (please check one)

☐ Monthly on the 1st ☐ Monthly on the 15th ☐ Weekly

In the amount of $_____

With a start date of __**_____**

From (your account):

Name on Account: _____

Financial Institution: _____

Routing Number: _____

Account Number: _____

**** Please provide a voided check if account is a checking account.**

These funds will be received by Fox Communities Credit Union, routing number 275977256,
For Credit To:

Business Name: **Holy Spirit Parish**

Account Number: _____

This authorization will remain in effect until my 2022-2023 tuition is paid in full. Holy Spirit Parish is not able to change the authorization amount unless a new form is filled out. Holy Spirit Parish will notify Fox Communities Credit Union in a timely manner to revoke the authorization once the tuition is paid in full. In case of error, Fox Communities Credit Union must be contacted no later than 60 days after you receive your financial statement on which the error appeared.

_____ _____

Signature Date