

Willow Bend Learning Center

PAYMENT OPTIONS:

- **Methods of Payment:** Payment is accepted by **automatic bank draft, credit or debit card, check or money order**, made payable to WBLC. We also require credit card information on file, *regardless of any method of payment.*
- **Tuition Express:** For the convenience of our parents, we offer the **Tuition Express** advantage. Tuition Express gives you the option of making your tuition payments by **electronic bank draft or credit card (MasterCard or Visa only)**

Apart from the ease and convenience, there are several other advantages to this:

- ✓ End of late payment charges
- ✓ You can receive automatic payment notifications via e-mail (log on to www.tuitionexpress.com)
- ✓ You can create a personal log-in account with Tuition Express to view and print your payment history, monthly statements/receipts (for dependant care accounts), annual statements (for tax purposes)
- ✓ If you choose the credit card option, you can accumulate air miles or cash back bonuses (as per your credit card company)

I, _____ parent/guardian of

(Child's Name) _____

do hereby choose the following billing cycle and method of tuition payment:

- **Tuition Cycle:** The payment frequency may be chosen upon admission and can only be changed at the beginning of a calendar year, if elected before January 1st. Please select one of the following tuition billing cycles which may be used for your account:

- Biweekly** (*every other Friday*)
- Monthly** (*1st of every month*) (*Not currently offered*)

- **Payment Method:** Please select one of the following payment methods to pay for your account:

OPTION 1: Credit or Debit Card Payment- If you choose to have your tuition charged to your **credit or debit card**, it will be charged on the same day as your account is billed. **If you use this method for tuition payment your account will be charged a convenience fee equaling 3% of the total tuition.** (e.g. on a monthly tuition of \$700.00 you will be charged an additional \$21.00, so your total charge will be \$721.00) **A 2-week written notice is required to change the credit card on file.**

OPTION 2: Electronic Bank Draft- If you choose to pay by **electronic bank draft or ACH**, your bank account will be debited on the same day as your account is billed. **If you use this method for tuition payment your account will be charged a convenience fee of \$1.00 per withdrawal.**

OPTION 3: Check or Money Order- You can continue paying your tuition in the traditional way by check or money order at the front desk. *We do not accept cash payments.*

- **Returned Checks:** A **\$30.00 NSF fee** will be charged on all declined checks and credit cards. Per your payment history, and on management discretion, you may be required to pay by **money order only**, after two declined payments.

Parent/Guardian's Signature _____ Date _____



Hop aboard the Tuition Express and never write a check again!

As your childcare provider, we are excited to offer you the convenience of automatic tuition payments through Tuition Express. You'll no longer need to write a check or remember your checkbook when you're picking up your child at the end of a hectic day. Your payment will be safely and securely processed by Tuition Express, giving you peace of mind that your tuition has been paid on time! It's easy to enroll and even easier to participate. You'll be joining tens of thousands of parents nationwide who enjoy the ease and convenience of Tuition Express.

To learn more about Tuition Express, automatic payment notifications or reviewing your payment history, please visit www.tuitionexpress.com.

For Bank Account Authorization, complete and return to center management.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION

I (we) authorize _____, (called "CENTER" in this Authorization) to initiate debit entries to my (our) Checking or Savings Account indicated below at the depository financial institution indicated below (called "DEPOSITORY" in this Authorization). I (we) authorize CENTER to withdraw sufficient funds to pay my (our) regular childcare tuition and/or other childcare related fees that are due and payable. I (we) authorize CENTER to use the third party sender, Tuition Express® to process all payments. I (we) acknowledge that the origination of Automated Clearing House (ACH) transactions to my (our) account must comply with the provisions of United States Law.

Credit Union Members: Please contact your Credit Union to verify account and routing numbers for automatic payments.

Form fields for: Your Name, Phone #, DEPOSITORY - Bank or Credit Union Name, Address, Bank or Credit Union Address, City, State, Zip, City, State, Zip, Type: [] Checking [] Savings

Routing Transit Number (see sample below) Account Number (see sample below)

This authorization will remain in full force and effect until I (we) notify the CENTER in writing of its termination in such time and in such manner as to afford Tuition Express and DEPOSITORY a reasonable opportunity to act upon it. Notices must be received at a minimum of 5 business days in advance of the termination date.

Signature _____ Date _____

Record Retention Notice: The child care provider shall retain all parent (client) authorization forms in a secure location for a period of two years from the date of client withdrawal from the Tuition Express™ program.

*Tuition Express is an assumed business name of Blum Investment Group, Inc.



Routing Transit Number Account Number Check Number

Please attach a copy of a voided check here. Deposit slips not accepted.

[] Check here if this information is new or different from what we have on our records.

Child's Name: _____

Note: Regardless of which option you choose, you are still required to fill out the Tuition Express Credit Card Payment Authorization form. Your preferred method of payment or your credit card on file may be used in the event of NSF checks, credit card declines, improper termination, other fees charged as per the Center's policies, and any other past due balances.



For Credit Card Authorization, complete and return to center management.

CREDIT CARD PAYMENT AUTHORIZATION

I (we) hereby authorize _____ (called "CENTER" in this Authorization) to initiate recurring credit card charges to the below referenced credit card account for the purpose of collecting childcare related payments. I (we) understand that the charges to the below referenced credit card account will be based on charges that are due and payable at the time of the credit card transaction. I (we) understand that this agreement is between myself (us) and the below referenced "CENTER". I (we) authorize CENTER to utilize Tuition Express* to capture, create, and transmit all credit card information. I (we) indemnify and hold harmless, Tuition Express from any and all liability resulting from any and all transactions. All disputes will be directed to and addressed by and between CENTER and the below signed cardholder. I (we) understand that to properly affect the cancellation of this agreement, I (we) are required to give CENTER written notice of revocation. A minimum of 5 business days is required to affect revocation.

PLEASE CONTACT CENTER REPRESENTATIVES FOR CREDIT CARD TYPES ACCEPTED BY CENTER.

Form fields for Cardholder Name, Phone #, Cardholder Billing Address, Account Number, City, State, Zip, Expiration Date, Cardholder Signature, Date.

*Tuition Express is an assumed business name of Blum Investment Group, Inc.

Check here if this information is new or different from what we have on our records.

Child's Name: _____

Parent Acknowledgement: I have received a copy of the Center's policies and I understand that regardless of which payment option I choose, I am still required to fill out the Tuition Express Credit Card Payment Authorization form. This form will stay on file and either my preferred method of payment or my credit card will be charged to settle all unpaid balances on my account due to NSF checks, credit card declines, improper notice of termination, other fees charged as per the Center's policies, and any other past due balances. A 3% fee transaction charge in addition to the \$30.00 NSF charge, will be added to the total balance.

Parent/Guardian's Signature _____ Date _____

Record Retention Notice: The child care provider shall retain all parent (client) authorization forms in a secure location for a period of two years from the date of client withdrawal from the Tuition Express™ program.

For Official Use Only: Date Received: _____ Employee Signature: _____