



PRE-AUTHORIZED DEBIT - TUITION PAYMENTS

Please complete and sign the below form in order to submit tuition payments via our Pre-Authorized Debit plan.

I agree to pay my son(s)' tuition via Pre-Authorized Debit. Attached is a VOID cheque.
The balance will be communicated to me at a minimum of 30 days prior to the first day of school.
This agreement is valid as long as my son remains enrolled at Loyola High School.
Please note that we are only able to associate one bank account per client.

- I agree to pay my balance in 10 equal payments starting on September 1 2017 and ending on June 1 2018 (no discount on invoice).
- I agree to pay my balance in 2 payments on September 1, 2017 and on February 1, 2018 (You will receive a \$300 credit upon your second payment).
 - First payment includes **all fees and the first term tuition**
 - Second payment is second term tuition of \$2,296.50 less \$300 credit
- I agree to pay my balance in 1 payment on September 1, 2017 (You will receive a \$300 credit).

The debit will be processed to my

- Personal account
- Business account

on the 1st day of the month, or the next business day. Please note that there may be a delay in processing the September 1st payment.

Client Name _____
(as indicated on Statement of Account)

Date: _____

Signature: _____

Family #: _____

Student(s)' Name(s): _____

Contact Information _____
(phone number and email):

Financial institution name: _____

Account number: _____

Transit number: _____

I may revoke my authorization at any time, and change my banking information subject to providing notice of **30 days**. To obtain a sample cancellation form, or for more information on my right to cancel a Pre-Authorized Debit Agreement, I may contact my financial institution or visit www.cdnpay.ca.

For inquiries, please contact: Jenny Bouras at Loyola High School
7272 Sherbooke St. West, Montreal, QC H4B 1R2
514-486-1101, ext 264 / Email: finance@loyola.ca

I have certain recourse rights if any debit does not comply with this agreement. I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this Pre-Authorized Debit Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca.