

Pre-Authorized Payment Plan

I/We hereby authorize the Toronto Waldorf School to draw payments on the _____ day of each month under our pre-authorized payment plan. Payments should be charged to the bank account specified below and/or as outlined on the attached void cheque whether it continues to be maintained at the same branch or is transferred to another branch. These payments are for the monthly After-School Program in the amount of \$_____.

Payment start date: **September 2007**

Payment completion date: **May 2008**

Name (please print): _____

Authorized signature: _____

Date: _____

Name of Bank: _____

Transit Number: _____

Branch Number: _____

Account Number: _____

Bank Address: _____

**** Please attach a void cheque ****

This authorization may be cancelled at any time upon written notice.