



Whitman-Hanson Regional School District

Preschool Tuition Payment Authorization Form

PLEASE NOTE THAT ALL MONTHLY INSTALLMENTS WILL BE WITHDRAWN FROM YOUR ACCOUNT
ON THE FIRST BUSINESS DAY OF EVERY MONTH

Credit/Debit Card Information (WE DO NOT ACCEPT Discover Cards or Amex)

Card Number: _____

Name on Card: _____

Expiration Date: _____ / _____

Zip Code: _____

CVV Code: _____

I authorize the Whitman-Hanson Regional School District to automatically withdraw two equal payments based on total tuition from the above account on August 1, 2024 and on February 1, 2025, for the Preschool Tuition.

I authorize the Whitman-Hanson Regional School District to automatically withdraw 10 monthly installments based on remaining tuition less the deposit from the above account beginning in August 2024 and ending in May 2025, for the Preschool Tuition.

Signature

Print Name

Date