



## Credit Card/ACH Payment Authorization

All credit card payments will be charged a 3% convenience fee. Payments may be made by check, cash, credit card or ACH. Even if you plan to pay by check or cash, all families must still provide a credit card or ACH information below to keep on file. If payment is not received within one week of due date, the card on file (plus a 3% convenience fee) or the bank account below will be charged.

I understand that my bank account or credit card (plus a 3% convenience fee) will be charged if payments are not made by check or cash within one week of the applicable due dates.

Initial Here \_\_\_\_\_

Family Last Name: \_\_\_\_\_

Participant's Name(s) 1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

***You are required to fill out EITHER the Credit Card OR ACH information below:***

### **Credit Card Information (all credit card payments will be charged a 3% convenience fee):**

Billing Name (as it appears on credit card) \_\_\_\_\_

Address (associated with credit card) \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ Security Code: \_\_\_\_\_

### **ACH Information:**

Name (as it appears on account) \_\_\_\_\_

Address (associated with account) \_\_\_\_\_

Bank Name: \_\_\_\_\_

Bank Account Type: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

**I authorize the PCH to use the information above to pay my outstanding balances.**

**Sign Here** 

Date: \_\_\_\_\_