

Berry Patch Billing Contract



If you completed a Billing Contract for the 2021-2022 school year, you do not need to complete a new form.

Select your payment method and email/mail form to Carrie Lounsberry by August 15, 2022.

_____ ACH Payment (**Attach void check to completed form**)

OR

_____ Online Credit Card Payment (**Payment instructions on monthly invoice**)

Parent/GuardianName (Please Print): _____

Child's Name: _____ Child Attends: ___ Calvary ___ Colonial

Address: _____

City: _____ State: _____ Zip: _____

FOR ACH PAYMENT ONLY:

Withdrawal amount will match your current month's invoice and be withdrawn on the 10th of each month.

Please debit my monthly invoice payment from (check one):

- Checking Account (**attach voided check**)
- Savings Account (**attach deposit slip**)

Bank Routing Number: _____

Bank Account Number: _____

I authorize The Berry Patch to process debit entries from my checking or savings account indicated above. I understand that this authorization will remain in effect until a cancellation request is submitted in writing, or my child withdraws from the program. If I wish to cancel my authorization or make any changes to the above information, I will submit a new form to The Berry Patch. I have attached a voided check.

Signature: _____

Date: _____

For office use only: ACH spreadsheet ___ Bridgewater ___ Notified ___

Updated 04/01/22