



SCHOOL AGE CHILDCARE DRAFT

YMCA of Hagerstown

BANK DRAFT AUTHORIZATION FORM

DEDUCTION INFORMATION for Child: _____

Childcare Site: _____ Weekly Amount: _____

Date of First Deduction: _____ Parent/Responsible Party Initials: _____

SECTION 1: Bank Draft - Withdrawal from Checking or Savings Account

Bank Name: _____

Account Type (Check One): ☐ Checking ☐ Savings

Account Holder Name: _____

Account #: _____

Routing # of Bank (9 digits): _____

SECTION 2: Credit Card Draft - Withdrawal from

Card Type (Check One): ☐ Visa ☐ Visa Check ☐ Mastercard ☐ Discover

Cardholder Name: _____

Card #: _____

Expiration Date: _____ CVV#: _____

RULES AND REGULATIONS

Please read carefully and sign below.

1. I authorize the YMCA of Hagerstown to initiate debit entries to my account.
2. Withdrawals/charges take place Monday for Bank Draft or Tuesday for Credit Card the week prior to care.
3. Drafts are weekly payment plans, they will continue through the end of the school year unless you fill out the draft cancellation form at the YMCA, or provide 30 days written notice of payment plan changes.
4. CANCELLATION of this draft must be made IN PERSON at the YMCA, or in writing.
5. There are NO REFUNDS.
6. Bank draft option must be accompanied by a canceled/void check.

YMCA CHILDCARE AGREEMENT

1. It is to my complete understanding that if I wish to terminate, or change my childcare in anyway, I must give the YMCA a 15 day written notice.
2. I understand that School's Out care is an additional cost that must be paid at time of care and WILL NOT be added to my draft, however late pickup fees MAY be added to my draft.
3. Should any Childcare draft not be honored by my bank for any reason, I understand that I am still responsible for that payment plus a service charge applied by the YMCA. This is in addition to any service fee my bank may charge.
4. I agree to notify the YMCA, in a timely manner, of any changes to my credit card information; including such situations as change in expiration, card replacement, etc., and that the failure to do so may result in additional bank and/or processing fees.

I have read the above Rules and Regulations, and YMCA School Age Childcare Agreement, and fully understand them, and agree to abide by them.

Signature: _____ Date: _____

Printed Name of Child Participant: _____