

PAYOR'S AUTHORIZATION FOR PRE-AUTHORIZED DEBITS FOR TUITION PURPOSES

Beehive Christian Early
Learning
8255 – 13th Avenue
Burnaby, BC V3N 2G6
604-521-6601
finance@beehivepreschool.ca

Please complete the Pre-Authorized Debit (PAD) Plan Agreement Below

These services are for (check one) _____personal or _____business purposes. (Please select 'personal')

I/We authorize Beehive Christian Early Learning and the designated financial institution (or any other financial institution I/We may authorize at any time) to begin deductions as per my/our instructions for monthly tuition payments, for payment of all charges arising under my/our account(s) with Beehive Christian Early Learning. Regular monthly payments for the full amount of services delivered will be debited to my/our specified account on the 1st day of each month. The amount to be withdrawn each month is provided on the Registration Form.

The Special Event Fee (\$75.00) plus the tuition fee for June 2025 will be processed in September 2024. The remaining monthly withdrawals (October to May tuition) will be processed on the 1st day of each month.

This fee schedule includes all government legislated statutory holidays and any days the child does not come to the facility due to sickness, appointments, vacations, etc. If the Pre-Authorized Monthly withdrawal cannot be completed due to insufficient funds, the payment must be made by email/Interac e-Transfer within 7 (seven) days of the payment due date. Please be aware that incomplete Pre-Authorized Debits are subject to an additional Bank Administration fee of \$10.00 per payment. This amount should be added to the resulting email/Interac e-Transfer. Failure to do so may result in forfeiture of your child's spot in the program and staff may then actively seek to fill the space.

Please Note: If the 1st day of the month falls on a statutory holiday or weekend, payments will be processed on the next business day. Fees are generally non-refundable, but a refund of \$75.00 will be granted for notice of withdrawal before June 1st of the year of registration.

I/We agree to provide a minimum withdrawal notice of one calendar month. There is no refund of June fees for withdrawal after April 1 of the current school year.

In the case of variable amount PADs, Beehive Christian Early Learning will obtain my/our authorization for any other one-time or sporadic debits and provide 10 (ten) calendar day's written notice prior to any debits.

This authority is to remain in effect until Beehive Christian Early Learning has received written notification from me/us of its change or termination. This notification must be received at least 30 (thirty) calendar days before the next debit is scheduled. I/We may obtain a sample cancellation form, or more information on my/our right to cancel a PAD Agreement at my/our financial institution or by visiting:

<https://www.payments.ca/resources/payment-guides/business-guides/pre-authorized-debit>

I/We have certain recourse rights if any debit does not comply with this agreement. For example, I/We have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain a form for a Reimbursement Claim or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit:

<https://www.payments.ca/resources/payment-guides/business-guides/pre-authorized-debit>

Tuition payor's name & address:

Date: _____

This payment is made on behalf of: _____
(full name of student(s))

Parent/Guardian name if different than tuition payor above: _____

The tuition fee will be withdrawn monthly over 9 months (Sept – May) on 1st day of the month.

By signing below:

1. I/we acknowledge my/our financial obligation to the school and will ensure that payments will be forwarded as per the current school year's tuition grid. If during the course of the school year I intend to withdraw my child I understand that I/we must give 1 month's notice to the school at month-end or pay 1 month of tuition in lieu of notice.
2. I/we understand and accept the terms of participating in this pre-authorized debit plan.

Authorized Signature(s):

PLEASE ATTACH VOID CHEQUE OR BANK ACCOUNT INFORMATION SHEET