

Payment Form

Start Date: _____ Account #: _____

Account Holder(s)/Parent(s) Name: _____
First Last

Name: _____
First Last

Payee's Name (If different from above) _____
First Last

Payee's Telephone
 Home: _____ Cell: _____ Work: _____

1st Member's Name _____
First Legal Last

2nd Member's Name: _____
First Legal Last

AFFORDABLE CHILD CARE BENEFIT (ACCB): It is your responsibility to provide Okanagan Boys and Girls Clubs (BGCO) with your approved government Benefit Plan. If we do not receive this directly from you then you will be responsible for the full fee. *Please email your benefit plan to your club and they will send it to the Billing Department.*

Pre-Authorized Payment Options:

Chequing Account (*attach a voided cheque or pre-authorized bank form*)

Account Holder Name: _____
First Last

Transit#: _____ Branch#: _____ Account#: _____
5 Digits 3 Digits Minimum 7 Digits

OR

Credit Card Holder Name: _____ Signature: _____

Credit Card Number: _____ Expiry Date: _____
MM/YY

You the Payer (one payee per family) authorize Okanagan Boys and Girls Clubs (BGCO) to debit the bank account or charge the Credit Card identified above for monthly program fees.



Account #: _____

Account Holder(s)/Parent(s) Name: _____

Name: _____

AGREEMENTS:

_____ I hereby authorize BGCO to deduct monthly childcare fees from the bank/financial institution or credit card (VISA or Master Card) as listed on the Payment Form. September fees will be processed on the August 25th. Further payments will be processed on the 25th of the current month for the next month's services.

_____ If funds are not available when Payment is processed, BGCO may re-attempt to withdraw the funds at a later date.

_____ If my payment is returned NSF or declined my childcare services may be cancelled if payment is not received for childcare fees within 5 days of the returned payment.

_____ To cancel Care, a Program Withdrawal Form must be submitted and signed by your club's authorized personnel before the 14th of the month prior to cancellation.

_____ It is the responsibility of the parent to ensure that BGCO has a current address and phone number. Childcare fees are subject to annual increases; however, parent/guardians will be notified in advance of any such increases. Any fee increases or changes will be adjusted accordingly.

_____ BGCO respects your privacy. We protect your personal information and adhere to all legislative requirements with respect to protecting privacy. We do not rent, sell or trade our mailing lists. The information that you provide will be used to develop and deliver services. Personal contact and e-mail information will be used to keep you informed and up to date on the activities of BGCO, including programs, services, special events, open houses, funding needs and opportunities to volunteer. We also use and disclose data, which does not identify individuals, for statistical purposes to develop and enhance BGCO programs and services.

_____ Consent to share information; As the Account Holder(s)/Parent(s) listed on the New Member Billing Form, do you consent to share information with any other person(s)?

Name of Person or Persons that you wish to have access to your account (Other than Account Holders):

****Please note that a custody order may direct BGCO staff to disclose certain financial or other information.**

Account Holder(s)/Parent(s) Signature: _____ Date: _____
Mm/dd/yy

