SJB PREP ELECTRONIC CHECK PAYMENT FORM:

(Personal Information) Name on Check: _____ Your Name if different than above: Mailing Address: Email _____ Cell phone _____ Student Name & Grade Level: continue all Students' Names and Grade Levels on back if needed. (Banking Information) Bank Name & Address: Type of Account: (Circle one) CHECKING **SAVINGS** Acct. Routing Number: _____ Account Number: _____ Check Amount \$ Check Number: grant authorization to St. John the Baptist Parish to make a one-time payment withdrawal from my bank account noted above. Date _____ Signature of Account Holder