Print Form

Simply giving

Member Enrollment and Authorization Form

Return completed enrollment form to the Good Shepherd Lutheran Preschool

Complete this section for **ALL ENROLLMENTS** (Please print in black ink)

Check the appropriate box:	Last Name	First Name	M.I.
☐ New enrollment/authorization *	Mailing Address		
☐ Change in bank account *	City	State	Zip
☐ Change in authorized amount	Home Telephone #	Work Telephone #	

Donations/payments should be taken from:

☐ Checking (attach a voided check)

☐ Savings (attach a savings deposit slip)

Routing Number _____

Valid Routing # must start with 0, 1, 2, or 3

Account Number _____

REQUIRED:

I authorize Thrivent Financial for Lutherans and Vanco Services, LLC to automatically withdraw offerings/donations/payments from my account. I have attached a voided check or savings deposit slip. This authority will remain in effect until I give reasonable notification to terminate the authorization.

Account Holder Signature _____

Date _____

*** ATTACH A VOIDED CHECK OR SAVINGS DEPOSIT SLIP FOR A NEW ENROLLMENT OR CHANGE IN BANK ACCOUNT ONLY**

Complete this section for Lutheran **SCHOOL TUITION PAYMENTS**

School Name Good Shepherd Lutheran Preschool	Street Address 7000 Creedmoor Road	
City Raleigh	State NC	Zip 27613

(a) Total annual tuition for all family members $_____

(b) Number of payments 9

(c) Amount of each payment (a ÷ b) $_____

- Payments are drafted on the 5th day of each month

Date of First Payment 9/5/10

Date of Last Payment 5/5/11

***** REQUIRED *** MUST BE COMPLETED BY CONGREGATION / INSTITUTION**

Institution Code_____ **Student Number**_____ **Verifier Initials**_____