

# CHAPIN



## Recurring Gift Authorization Form

Direct Payment via ACH (Automated Clearing House) is the transfer of funds from a consumer account for the purpose of making a payment.

I (we) authorize THE CHAPIN SCHOOL to electronically debit my (our) account (and, if necessary, electronically credit my (our) account to correct erroneous debits) as follows:

Checking Account /  Savings Account (select one) at the depository financial institution named below ("DEPOSITORY"). I (we) agree that ACH transactions I (we) authorize comply with all applicable law.

Depository Name \_\_\_\_\_

Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_

Amount of debit(s) or method of determining amount of debit(s) [or specify range of acceptable dollar amounts authorized]: \$ \_\_\_\_\_.

Dates(s) and/or frequency of debit(s):

Monthly       Quarterly       Annually      Start Date \_\_\_\_\_

I (we) understand that this authorization will remain in full force and effect until I (we) notify THE CHAPIN SCHOOL in writing that I (we) wish to revoke this authorization. I (we) understand that THE CHAPIN SCHOOL requires notice at least two weeks prior to the date of the next withdrawal in order to cancel this authorization. **You agree that your typing of your name and sending this form constitute a "signature" to this consent that is a legally binding equivalent to a handwritten signature that shall bind you.**

Names(s) \_\_\_\_\_  
(Please Print)

Date \_\_\_\_\_ Signatures(s) \_\_\_\_\_

Please submit electronically to [carcherb@chapin.edu](mailto:carcherb@chapin.edu) or by fax to: 212.861.4959 or mail to:

The Chapin School  
Attn: Courtney Archer-Buckmire  
100 East End Avenue  
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