



ACH PAYMENT ENROLLMENT FORM

PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by New World Learning Academy to transmit payment data, by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

PAYOR INFORMATION

COMPANY New World Learning Academy	
ADDRESS 900 E. Pecos Rd. Suite 8A Chandler, AZ 85225	
CONTACT PERSON NAME Tracie Younce	TELEPHONE NUMBER (480) 248-6125

PAYEE INFORMATION

NAME	
ADDRESS	
TELEPHONE NUMBER	

FINANCIAL INSTITUTION INFORMATION

NAME		
ADDRESS		
TELEPHONE NUMBER		
NINE-DIGIT ROUTING TRANSIT NUMBER		
ACCOUNT TITLE		
ACCOUNT NUMBER		
TYPE OF ACCOUNT (please circle) Checking Savings Money Market		
SIGNATURE	Date	

PERSONNEL ONLY:

Student: _____ Date Processed: _____ Initials: _____