



AutoPay Program

Wake County Schools is pleased to offer parents the **AutoPay Program** to take the burden off of paying your child's Before and/or After School Program each month.

The **AutoPay Program** is a **recurring** payment method to automatically have your Before and/or After School expenses paid for you on the 1st of each month. Once you have enrolled, your bank account is drafted automatically. Your child will be enrolled in the AutoPay Program from September through May each school year. The program will continue from school year to school year, unless notified by parents. **The first AutoPay Payment will begin on 09/01 each school year for Traditional Schools. The first AutoPay Payment will begin on 07/01 for Tracks 1 – 3 or 08/01 for Track 4 Year Round Schools each school year.** You may enroll by simply completing the form attached one time or enrolling online. To enroll online go to: www.wcpss.net. Click on the "Parents" tab shown on the top of the page. Click on "Before – And After- School Program". Click on "Fee Schedules". You may enroll online or print the enrollment form. The AutoPay Program continues from school year to school year. **YOU DO NOT NEED TO REENROLL YOUR CHILD EACH YEAR.** We must receive your enrollment form or online enrollment by the 25th of the current month to have your child enrolled on the 1st of the following month. Your child will automatically be reenrolled in the AutoPay Program **each school year.** Your bank account will be drafted on the 1st of each month. **The program will continue from school year to school year, unless notified by parents.**

The AutoPay Program should ease the burden of remembering to pay for your child's Before and/or After School Program. If you have any questions regarding your payments, you can double check with your child's school site coordinator or lead secretary to verify the receipt of your payment. We are excited to offer this payment option to our parents. Your monthly Before and/or After School payment will be one less thing to worry about.

If you have any questions, please contact your child's school site coordinator or school lead secretary. Send your completed forms to: Wake County Schools Before and/or After School Program, c/o APS, 1400 Battleground Ave., Suite 213, Greensboro, NC 27408 or fax to: 336 691-0242.

Benefits of the AutoPay Program

No More Trips to the School, Convenience in Making your Payment, Easy Reconciliation – Your bank statement will show the amount of your AutoPay Payment made. Remember to notify us of any changes 15 days prior to a scheduled bank draft of any payment changes.

No Late Fees Your payment will always be made on time so you will never be assessed a \$10.00 late payment for forgetting to pay your site coordinator.

If you change bank accounts, simply send us a revised enrollment form reflecting the new information. You may discontinue the AutoPay Program at any time by giving your school site coordinator 15 days notice.

AutoPay Program Enrollment Form

Date Your Account will be Drafted

The 1st of Each Month

Please mark your records. You have been set up for the AutoPay Program. Your account will be drafted on the 1st of each month to pay for your child's Before and/or After School Care throughout the month. Please send this completed form to: Wake County Schools Before and/or After School Care, c/o APS, 1400 Battleground Ave., Suite 213, Greensboro, NC 27408. We must receive your completed form by the 25th of the current month to have your account drafted the following month. Students 1st Payment will begin on 09/01 each school year for Traditional Calendar Schools, 07/01 for Tracks 1-3 , or 08/01 for Track 4 Year Round Calendar Schools.

School: _____	Monthly <u>Amount to be Drafted</u>
Student Name: _____	_____ per Month
Type of School: () Traditional () Year Round Tracks 1-3 () Year Round Track 4	
Grade: _____	
A () BANKDRAFT - Savings Bank ABA # (9 digits) _____ Acct # _____	
B () BANKDRAFT – Checking * Include a Voided Check	
Parent Name: _____	
Parent Address: _____	City : _____
Parent Email Address: _____	Daytime Phone: _____
<i>Please allow 5 days to be set up</i>	

Preauthorization Form

I (we) hereby authorize Wake County Public School System and Automated Payment Systems, Inc. (APS), its agent to initiate debit or credit entries to my account by funds transfer and/or automated clearing house (“ACH”) transfer for the purpose of paying my child's Before and/or After School Care due the school on a monthly basis from 09/01 to 05/01 each school year for traditional schools or from 07/01 to 03/01 for Tracks 1-3 or 08/01 to 04/01 for Track 4 year round calendar schools. A \$2.00 program fee will be assessed to my bank account each month along with the monthly amount shown above. I may amend the amount to be drafted each month by contacting my school's Site Coordinator or Lead Secretary.

This authority is to remain in full force and effect until I notify Wake County Public School System that I wish to end this agreement and Wake County Public School System has had reasonable time to act on it, or until Wake County Public School System or my bank has sent me 10 days written notice that they will end this agreement.

I understand that in the event my account has insufficient funds to cover the monthly payment drafted, or my draft rejects due to any other reason, a \$15.00 reject fee will be assessed per draft. Any rejected amounts and reject fees due and not paid by the 5th of the month will be subject to the \$10.00 late payment fee. I further understand my child may not attend on a part-time basis unless the full reject fee is paid. It is my duty to notify Wake County Public School System at least 15 days prior to a scheduled payment of any changes made to my designated account. If an AutoPay draft rejects more than **one** time per school year, the AutoPay Program will **no longer be available** for the remainder of the school year.

I am an authorized party of the Account listed above, and am exercising my powers as such.

Authorized Signature

Date

(ATTACH A CHECK MARKED VOID FOR BANKDRAFT OPTION B)