



GREEN COUNTY FAMILY YMCA
Contract Fee Preschool Agreement

Child's Name: _____ DOB: _____

Parent/Guardian Name: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Thank you for choosing the Green County Family YMCA as your community home. This agreement outlines important information regarding the YMCA Preschool payment plan. Please read the following information thoroughly, initial each statement below, and sign and date at the bottom.

_____ I have paid my \$25 enrollment fee.

_____ I have discussed payment arrangements with Member Services and understand that I may pay in full or by EFT (Electronic Funds Transfer).

Payment Options (please check one)

_____ I am paying in full for the year

_____ Please use the same account that I have set up for my membership for Preschool

_____ I authorize the Green County Family YMCA to initiate electronic funds entries to the checking/savings account or credit card listed below in the amount of _____ per month.

EFT Members Only

My last bank draft will be on: _____

New Account

Name _____

Bank Name _____

Routing Number _____ Account _____

OR

Credit Card Number _____ Exp. Date _____ CVC _____

Signature

Date

Staff