



Payment Authorization Form

The authorization form gives the Lawrence Arts Center and your financial institution authority to withdraw your payment from your account. All you need to do is:

1. Fill in your name, social security number and phone number in the Payor Information section.
2. Check either your savings or checking account that funds will be debited from.
3. Fill in your financial institution, account number, routing/transit number, and location of your financial institution
4. Attach a voided check for verification of all financial institution information.
5. Please sign and date the bottom of the form.

Payor Information

Payor Name: _____

Payor Address: _____

Payor Phone: _____

Authorization for Payment

I authorize Lawrence Arts Center, Inc. to initiate electronic debit entries each month from my:

Check one: Checking Account Savings Account . If necessary, credit entries and adjustments for any debit entries to this account. I acknowledge that the origination of ACH transactions to my account and comply with the provisions of U.S. law. This authority will remain in effect until I have cancelled it in writing.

Bank Account Information

Financial Institutions Name: _____

Account Number at Financial Institutions: _____

Financial Institutions Routing/Transit Number: _____

Financial Institution City and State: _____

Payor Authorization

Signature: _____

Date: _____

Please staple voided check to side of this page.