

AUTHORIZATION AGREEMENT FOR CLEARPAY SERVICE

(授業料等銀行自動引き落とし同意書)



Nishiyamoto Inc.

I(We) hereby authorize Nishiyamoto Inc, herein-after called NAC, to initiate debt entries against my(our) Checking account indicated below, and the depository institution named below, hereinafter called 'Depository,' to debit the same from such account.

The initiation of the debt entries by NAC is to be limited to tuition, registration fee, examination fee, kyozaï-hi and other school-related expenses, which may be owed by the account holder(s). Notice of initiation will be provided prior to each transactions.

Depository Name (銀行名) Ally Bank		Branch (支店名)	
City Philadelphia		State PA	Zip Code 19101
Transit/ABA Number (チェック左下番号) 124003116	Saving	Account Number (チェック右下の口座番号) 1029595517	
	Checking		

This authority is to remain in full force and effect until NAC has received written notification of termination from one or both of the undersigned, so that the School and Depository will have had a reasonable amount of time to act on it.

Name (S) (口座主) 共有名義の場合は2人共お願いします。 Rina Ramirez Michael Ramirez		平日 ・ 補習
Date (日付) May 16, 2023	Signature (口座主) 	Signature (二人名義の場合) 
Grade (学年・組) 年長	Student's Name (生徒氏名) Reon Ramirez	
もも	ラミレス リオン	

VOID チェックをホッチキスでこの用紙に添付してください。