



## Parent/Sponsor Withdrawal as Tuition Express Participant

I \_\_\_\_\_, hereby request Solana Beach Child Development Center, ("Center") to withdraw me from any future participation in Tuition Express' automatic payment service. I understand that by requesting withdrawal from Tuition Express it severs the preauthorized debit relationship in its entirety. I understand that this completed request form must be received by "center" no later than 5 business days before the next scheduled date of the automatic payment to be valid. By requesting withdrawal from Tuition Express I hereby indemnify and hold harmless, Professional Solutions, owners of Tuition Express, from any and all liabilities resulting from "center" processing payment transactions after the date of this request.

### Center Information

<u>Solana Beach Child Development Center</u>		( <u>858</u> )	<u>794-7160</u>
Center Name		Area Code	Phone Number
<u>309 North Rios Avenue</u>	<u>Solana Beach</u>	<u>CA, 92075</u>	
Center Address	City	State & Zip Code	
_____ Signature of Authorized Personnel of Center		_____ Date	

By signing above I hereby accept the withdrawal of my client from Tuition Express and agree to terminate the processing of any future automatic payments via Tuition Express. I understand and agree to reimburse Tuition Express for any loss it may incur and hereby indemnify and hold harmless, Tuition Express, from any and all liabilities resulting from the processing of this request.

### Client Information

_____ Client Name		( _____ )	_____ Client Phone Number
_____ Client Address			
_____ City	_____ State	_____ Zip Code	
_____ Client Signature		_____ Date	

I understand that this request will terminate any future debit transactions conducted by Tuition Express. I understand and agree to reimburse Tuition Express for any loss it may incur in honoring this withdrawal request.

### Center Instructions

Please retain this document for your records.