



**COMPLETE THIS SECTION FOR ENROLLMENT IN  
THE MONTHLY AUTOMATIC DEDUCTION PLAN**

(Return this form with your first payment due on July 1, 2016)

Last	First	Middle Initial
Mailing Address	City	State ZIP CODE
Home Telephone Number	Work Number	Cellular Number
Check the appropriate section: <p align="center"><u>  X  </u> New enrollment/authorization for the 2016-2017 academic year.</p>		
PRIVACY/CONFIDENTIALITY: This Authorization Form is seen by the non-profit Lutheran organizations enrolled in Simply Giving® as well as by the Vanco Services employees who process it. In addition, participant name and address information may be provided to Thrivent Financial for Lutherans. Participant information will not be shared with any other organizations.		
Payments should be taken from: <p align="center"> <input type="checkbox"/> Checking (attach a voided check)  <input type="checkbox"/> Savings (attach a savings deposit slip)  <input type="checkbox"/> Credit Card (Master Card or VISA)         </p> Routing No.: _____ Account No: _____	I authorize Thrivent Financial for Lutherans and Vanco Services, LLC to automatically withdraw tuition payments from my account. I have attached a voided check or savings deposit slip. This authority will remain in effect until I give reasonable notification to terminate the authorization.  Authorization Signature: _____	

**Attach a voided check or savings deposit slip.**

If you have any questions regarding tuition, please call the Account Manager at 488-0000 ext. 222.