## SEVEN OAKS SCHOOL DIVISION community begins here

## SEVEN OAKS SCHOOL DIVISION

## **Transportation Department**

1985 Grassmere Road, West St. Paul, MB R4A 6A3 TELEPHONE: 204-338-7051 FAX: 204-334-6889

## **AUTHORIZATION FORM FOR PRE-AUTHORIZED DEBITS (PAD)**

I/We acknowledge that this authorization is provided for the benefit of SEVEN OAKS SCHOOL DIVISION and my financial institution and is provided in consideration of my financial institution agreeing to process debits against my account in accordance with the rules of the Canadian Payments Association.

| Parent/Guardian:  | -   |
|---|---|
| Address:  |   |
| Telephone No: ()  |   |
| BANK NAME:  |   |
| Bank Address:   |   |
| Bank Phone No.: ( )   |   |
| (3 digit)   | (5 digit)   |
| ephone No: (  |   |
| I/We hereby authorize SEVEN OAKS SCHOOL DI<br>Transportation Policy as follows:   | /ISION to draw on my/our account listed above as per  |
| Purpose: <u>Student Bus Transportation</u> Mor  | nthly \$ Total \$   |
| Schedule: <b>September 1st, 2023 to June 3rd, 2</b>   | 2024 (10 equal payments)  |
| Oaks School Division (the division). This agreemed otherwise have any bearing on the contract for I/We acknowledge that by providing an delivery by me, to my financial institution listed of I/We undertake to inform the division in a prior to the next due date of the PAD. | ent applies only to the method of payment and does not services exchanged. d delivering this authorization to the division constitutes above. writing of any change in the account information provided |
| Date  | Authorized Signature  |
| Date  | Authorized Signature  |
| Student Name  | School  |
| Student Name  |   |
| Student Name  | School  |

A void cheque or bank confirmation document must be attached to the PAD Authorization form.

For any cancellation or change to banking information, please give the Transportation Department 10 business days notice prior to the 1st of the month.