



**Montgomery
CHILD CARE
ASSOCIATION**

INVOICING PREFERENCE

To minimize the impact on our environment and reduce mailing expenditures, MCCA's Accounts Receivable Department chooses to email monthly invoices to families. Please print your preferred email address below. If you desire to receive your invoice via the United States Postal Service and not by email, please check the box below.

Thank you for taking the time to complete this form. Sign and return it with your invoice or mail to: MCCA, Accounts Receivable Dept.
3204 Tower Oaks Blvd., Suite 330
Rockville, Maryland 20852

Name of Parent listed on the invoice: _____
Please Print

Your Child's Name: _____
Please Print

Center Name: _____
Please Print

Your email address: _____
Please Print

I do not wish to receive my invoice electronically.

Your Signature



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PAYMENT OPTIONS

You have the option of paying your MCCA invoice by credit card or by direct draft from your bank account. Please complete this form if you would like to pay your bills electronically.

EZ-EFT (Electronic Funds Transfer) is the easiest way for you to pay your weekly/monthly bills. It's simple and secure!

HOW DOES EZ-EFT WORK?

Once you enroll in EZ-EFT, your financial institution will automatically send us your payment from your checking, savings or credit card account on the day it is due. It's your choice.

WHAT ABOUT SECURITY?

Payment is made by your financial institution only with your authorization.

What's more, Federal consumer safeguard regulations are even more stringent for EZ-EFT than when you pay by check, which means that EZ-EFT is more secure than conventional checking.

Convenience — EZ-EFT reduces the time and hassle of paying bills. Automatic payment means never having to remember to write, drop-off, or mail a check again.

Control — You determine the method of payment. And you can cancel this free payment service for any reason, at any time.

Value — It saves you time and simplifies your busy life.

To Register for EZ-EFT simply:

1. Complete the enrollment form below.
2. If you choose to pay with the checking account option, please enclose a *voided* check.
3. Mail to: MCCA Accounts Receivable Dept., 3204 Tower Oaks Blvd., Suite 330 Rockville, Maryland 20855.

EZ-EFT Authorization Form

I hereby authorize

_____ to make my payment on my behalf from

(Print name of your financial institution.)

the checking, savings or credit account listed below and transfer it to **Montgomery Child Care Association, Inc.**

CHOOSE ONE:

_____ **Checking Account Transfer**
(Voided check must be attached.)

_____ **Credit Card Charge**

_____ **Visa** _____ **MasterCard**

_____ (Credit Card Number)

_____/_____/_____ (month/year)
(Expiration Date)

I understand that I am in full control of my payment, and if at any time I decide to make any changes or discontinue this service, I will notify **Montgomery Child Care Association Inc.** Change of payment method will not affect the terms of my contract.

Name _____

Address _____

City _____

State _____ Zip _____

Signature _____

Date _____