



CISD Prekindergarten Tuition 2025-2026

ACH DEBIT AUTHORIZATION FORM

This form is an Authorization Agreement for electronic debits through the Automated Clearing House (ACH) Network. I, hereby authorize Carroll Independent School District, ("CISD") to initiate ACH debit entries as well as necessary correction and adjustment entries, to my account as indicated below.

This authorization is to remain in full force and effect until CISD has received written notification from me 30 days before next withdrawal (or either of us, if the account listed above is a joint account) of its termination (authorization revoked) in such time and in such a manner as to afford CISD a reasonable opportunity to act on it. Any changes to the bank account information must be promptly submitted in writing to CISD.

I state that I am currently an authorized signer on the account listed and agree to notify CISD immediately and in writing if my signer status is no longer in effect on the specified account. I understand and agree that I am responsible for any loss suffered by myself or any third party if I fail to provide notification to CISD by this authorization.

Upon accepting a Pre-K tuition spot, I am submitting payment for the **first and last month's tuition by check or money order**. This payment is non-refundable. Staffing decisions are based on the number of enrolled students, so families accepting a tuition-based spot must be committed to attending the program.

Amount **\$867.00** for a total of **8** withdrawals, in addition to August and May prepaid tuition totaling **\$8,670.00** for the **2025-2026** school year. *per Texas Education Agency Tuition Rate Approval*

Date of Withdrawal **First of each month** (Unless the first is a non-business day, then it will be the first business day following the 1st)

Bank Withdrawals: **September 1, 2025, to April 1, 2026 (August and May tuition is prepaid)**

*Personal Accounts only, No Business Accounts can be used for tuition purposes

- ☐ Personal Checking Account
☐ Personal Savings Account

Name on Account _____ Relationship to Student _____

Bank Name _____

Account # _____ ACH Routing & Transit # _____

- ☐ I request FSA monthly receipts (emailed monthly on the 10th day)
☐ I understand that my 2025 tax statement will be mailed no later than Jan 31, 2026
☐ I have attached a voided check or letter from a financial institution confirming account information

Signature _____ Date _____

Student Name(s) and Birthdate(s) _____

List the names, and birthdates of each child that tuition payments apply to

- ☐ Returning Student
☐ New Student

Parent(s)/Guardian(s) Name Printed _____

Home Address _____

Parent Email Address _____

Customer should retain a copy of this authorization for their records.

CISD must retain a copy of this authorization for their records, for a minimum of four (4) years from the last transaction.



CARROLL
Independent School District

**Tuition-Based PreKindergarten Program
Parent Enrollment Agreement**

The parent(s)/guardian(s) of _____ hereby enroll in the Carroll Independent School District **Tuition-Based PreKindergarten Program, for the 2025-2026** school year, subject to the provisions below. In consideration of the acceptance by the PreK program of this student, the parent(s) agree, jointly, to pay the tuition and fees as outlined in this Enrollment Agreement.

Please read each statement below carefully, and initial each statement.

_____ I understand that upon accepting a prekindergarten spot, I am required to pay the first and last months' tuition, which is **non-refundable**. (checks or money orders made out to Carroll ISD)

_____ I understand that tuition payments will be withdrawn on the first of each month from September through April.

_____ I understand my child may be withdrawn from the program for non-payment. I will bear the cost of any expenses related to the collection of delinquent payments, including attorney's fees.

_____ I understand that there will be a \$25.00 service charge for insufficient funds. If there are two insufficient funds, automatic payments will be terminated. You will be responsible for paying by check or money order on the 1st of each month.

_____ I understand that my tax statement will be mailed no later than January 31st to the address on record.

_____ I understand that I must fill out the [Withdrawal Form](#) 30 days before the next tuition payment. Tuition payments will be discounted for the remaining months; however, the first and last month's tuition is non-refundable. (The Withdrawal Form is also posted on the CISD PreK website)

_____ I understand my child is expected to arrive at school on time and remain for the full day.

_____ I understand that attendance is important for my child to benefit from PreK. Excessive absences and/or tardiness may result in withdrawal from the program at the district's discretion. If my child is withdrawn from the program for this reason, no refunds are given for that month. Upon enrollment in a Texas public PreK program, prekindergarteners follow the same attendance law as Kindergarten - 12th grade. *Texas Education Code - EDUC § 25.085. Compulsory School Attendance*

_____ I understand that my PreK student must be potty trained to attend the CISD Tuition-Based PreKindergarten Program.

_____ I understand that my child is expected to follow the CISD Student Code of Conduct.

Child(rens) Name(s) and campus

Acknowledgment and Authorization:

Parent/Guardian Signature _____ Date _____