

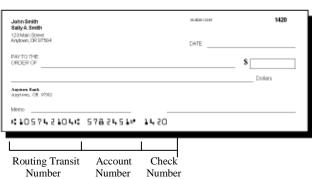
Hop aboard the Tuition Express and never write a check again!

As your childcare provider, we are excited to offer you the convenience of automatic tuition payments through Tuition Express. You'll no longer need to write a check or remember your checkbook when you're picking up your child at the end of a hectic day. Your payment will be safely and securely processed by Tuition Express, giving you peace of mind that your tuition has been paid on time! It's easy to enroll and even easier to participate. You'll be joining tens of thousands of parents nationwide who enjoy the ease and convenience of Tuition Express.

To learn more about Tuition Express, automatic payment notifications or reviewing your payment history, please visit www.tuitionexpress.com.

For Bank Account Authorization, complete and return to center management.

To Bank Account Addicing Complete and Tetain to Conter management			
I (we) hereby authorize to initiate debit entries to m institution indicated below sufficient funds to pay my (I (we) authorize CENTER (ny (our) Checking or Savings (called "DEPOSITORY" in (our) regular childcare tuitio to use the third party sender, nation of Automated Clearin	**RANSFER AUTHORIZATION	
Credit Union Members: Plea payments.	ase contact your Credit Union	n to verify account and routing numbers for automatic	
Your Name	Phone #	DEPOSITORY - Bank or Credit Union Name	
Address		Bank or Credit Union Address	
City	State Zip	City State Zip Type: Checking Savings	
Routing Transit Number (see sample below)		Account Number (see sample below)	
such time and in such manr	ner as to afford Tuition Expr	ntil I (we) notify the CENTER in writing of its termination in ress and DEPOSITORY a reasonable opportunity to act upon s days in advance of the termination date.	
Signature		Date	
		retain all parent (client) authorization forms in a secure at withdrawal from the Tuition Express TM program.	
•	•	siness name of Blum Investment Group, Inc.	





For Credit Card Authorization, complete and return to center management.

CREDIT CARD PAYMENT AUTHORIZATION			
I (we) hereby authorize			
CENTER.			
Cardholder Name	Phone #		
Cardholder Billing Address	Account Number		
City State Zip	Expiration Date		
Cardholder Signature	Date		
*Tuition Express is an assumed business name of B	lum Investment Group, Inc.		
For Official Use Only: Date Received:			

Record Retention Notice: The child care provider shall retain all parent (client) authorization forms in a secure location for a period of two years from the date of client withdrawal from the Tuition ExpressTM program.