Joyful Response®

Our school offers you a way to **respond joyfully** in meeting your tuition payment commitments.



Use Joyful Response to:

- > Make tuition payments consistently and conveniently.
- > Help you prepare and fulfill your tuition payment commitments with ease.
- > Enjoy saving time and cost of writing checks.

Complete this form and return it to the school office.

Joyful Response service provided by:



10733 Sunset Office Drive Suite 300 St. Louis, MO 63127-1020 **800-843-5233 lcef.org**



LCEF is a nonprofit religious organization; therefore, investments are not FDIC-insured bank deposit accounts. This is not an offer to sell LCEF investments, nor a solicitation to buy. LCEF will offer and sell its securities only in states where authorized. The offer is made solely by LCEF's Offering Circular. Investors should carefully read the Offering Circular, which more fully describes associated risks.

Joyful Response® Electronic Tuition Payment Program

Enrollment/Change Form

automatically from your bank accoun Check the appropriate box:	t or your LCEF StewardAccount®.	our current tuition payment. Your payments will be made
☐ New enrollment ☐ Paym	ent change 🔲 Account info	ormation change
Please Print in Black Ink		
	_	
Parent/Payer Last Name	Parent/Payer First Name	MI Daytime Telephone No.
Mailing Address	City, State, ZIP	Email Address
Student Name	Grade	
Student Name	Grade	
Student Name	Grade	
School Name	School Telephone Number	School Fax Number
School Mailing Address		City, State, ZIP
School Walling Address		City, Juice, Zii
My Payment Plan		
Student Name		Tuition Amount \$
Student Name		Tuition Amount \$
Student Name		Tuition Amount \$
	divided by	= \$
Total Tuition Due	Months to Pay	Monthly Transfer Amount
Debiting Account		
Debit from:		Transfer date (check one):
Checking		☐ Monthly on the 1st
Savings		☐ Monthly on the 15th
LCEF StewardAccount		Semi-monthly (1st and 15th) (Half of each month's transfer amount)
Account Number		
		Start date://
Routing Number (First nine numbers in	n bottom left-hand corner of check)	End date (if any):/
Authorization		
		es from my account. This authority will remain in effect until I til the last specified payment date.
Authorized Signature for Account		Date
TO BE COMPLETED BY SCHOOL	OFFICE	Attach void check or
Student ID#	Vanco Client ID#	denosit slip here

500514 201311

Initials_

Date_

Student ID# _