

Joyful Response®

A free electronic tuition payment program for our school and our families.

Our school offers a voluntary electronic tuition payment program for you.

Use Joyful Response to:

- make your tuition payments directly from your bank or Lutheran Church Extension Fund StewardAccount® to our school safely and conveniently.
- help you plan and fulfill your tuition commitments in a timely manner.
- eliminate the time and cost of writing checks.





Joyful Response service provided by:

Lutheran Church Extension Fund PO Box 229009 • St. Louis, MO 63122-9009 1-800-843-5233 • www.lcef.org





Student ID#

Student ID# _

Enrollment/Change Form				
Complete this form and return it to the s automatically from your bank account or	chool office to begin or cha your LCEF StewardAccount	nnge your current tuition payn t [®] .	nent. Your payments will be made	
Check the appropriate box: ☐ New enrollment ☐ Payr	ment change	☐ Account information chai	nge	
Please Print in Black Ink	-			
Parent/Payer Last Name	Parent/Payer First Na	me MI	Daytime Telephone No.	
Mailing Address	City, State, ZIP		E-mail Address	
Student Name	Grade			
Student Name	Grade			
Student Name	Crado			
student Name	Grade			
School Name		School Telephone Numb	er	
School Mailing Address		City, State, ZIP		
My Payment Plan				
Student Name		Tuition Amount \$	_	
Student Name			Tuition Amount \$	
Student Name		Tuition Amount \$	_	
	ided by	= \$		
Total Tuition Due	Months to Pa	y Month	ly 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		
Account Number		Start date://		
Routing Number (First nine numbers in bottom lefthand corner of check)		End date (if any):/	_/	
Authorization				
I authorize the above-named orga authority will remain in effect unt specified payment date.				
Authorized Signature for Account Date			Date	
TO BE COMPLETED BY SCHOOL O	FFICE			
Student ID#	Vanco Client ID#		Attach void check or savings deposit	
			or savings acposit	

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slip here.

Initials ___

Date _