



# MOKENA COMMUNITY PARK DISTRICT

## Application for Automatic Payment of Monthly Fees

The Mokena Community Park District is pleased to offer our customers the ability to pay monthly fees automatically through their checking, savings, or credit card account. Please complete the following application, include the necessary documentation and return it to the Administration Center.

### Please Print

Name: \_\_\_\_\_

For: \_\_\_\_\_

Child's Name

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Payment Method for Monthly Fees:  
(September 2026 thru April 2027)

Electronic Funds Transfer

**Circle one: Checking – Savings**

### Auto Pay Monthly Rates (circle one)

Prepschool: Res \$140 / NR \$155

Preschool: Res \$180 / NR \$195

Kinderbridge: Res \$275 / NR \$295

\$50 deposit & 1<sup>st</sup> month tuition:

Date paid: \_\_\_\_\_ Receipt # \_\_\_\_\_

Bank Account # \_\_\_\_\_

Bank Name \_\_\_\_\_

Bank Routing # \_\_\_\_\_

Please attach a voided check if debiting your checking account or a deposit ticket if debiting your savings account

Credit Card: MC, VISA, DISC, AMEX

Card # \_\_\_\_\_

Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Card Verification Number \_\_\_\_\_ (last 3 digits on signature panel on back of card)

### Please read and sign.

I authorize the Mokena Community Park District and the financial institution or credit card company listed above to pay the monthly fee on the scheduled due date. Each payment will be the same as if it were personally signed and authorized by me. Any payment made that is returned or is uncollectible will be assessed a returned item charge of \$25. This authority is to remain in effect for the months listed above until the Mokena Community Park District has received written notification from me of termination a minimum of 30 days before a scheduled due date. The Mokena Community Park District reserves the right to terminate this payment plan or my participation with written notification. I will provide a minimum of 30 days written notice to the Mokena Community Park District of any changes regarding the above account, i.e., change of financial institution, account number, etc.

I understand and agree to the terms of this letter and application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please return this form to: Kara Jelderks, Superintendent of Recreation  
Mokena Community Park District, 10925 La Porte Road, Mokena, IL 60448  
For information call: 708-390-2409 or email [kjelderks@mokenapark.com](mailto:kjelderks@mokenapark.com).