

Direct Debit Authorization

AUTHORIZATION AGREEMENT DIRECT PAYMENTS (ACH DEBITS)

I (we) hereby authorize **Rush Creek Yacht Club** hereinafter called **COMPANY**, to debit entries to my (our) account indicated below and the Financial Institution named below, hereinafter called **FINANCIAL INSTITUTION**, to debit same to such account. I (we) acknowledge the origination of **ACH** transactions to my (our) account must comply with the provisions of U.S. Law.

(Financial Institution Name) (Branch)

(Address)

(City- State) (Zip)

Type of Acct: ___ Checking ___ Savings

ABA (Routing/Transit Number) _____

Account Number _____

This authority is to remain in full force and effect until **COMPANY** has received written notification from me (or either of us) of its termination in such time and manner as to afford **COMPANY** and **FINANCIAL INSTITUTION** a reasonable opportunity to act on it.

(print individual name) (print individual name)

(print individual ID number) (print individual ID number)

(Signature) (Signature)

(Date)

PLEASE ATTACH COPY OF VOIDED CHECK OR DEPOSIT SLIP TO THIS FORM

BOG Approved Form