

Direct Deposit Agreement Form

PLEASE NOTE – Employees MUST complete this form AND attach a bank document that includes their bank routing and account numbers for confirmation (e.g., voided check, bank statement with balance marked out for privacy, or a screen shot from your online banking system).

Authorization Agreement

I hereby authorize Chesterbrook Swim and Tennis Club to initiate automatic deposits to my account at the financial institution named below. I also authorize Chesterbrook Swim and Tennis Club to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold Chesterbrook Swim and Tennis Club responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until Chesterbrook Swim and Tennis Club receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Club Manager or Vice President.

Account Information	
Name of Financial Institution:	
Routing Number:	
Account Number:	\Box Checking \Box Savings
	Signature
Name on Account:	
Authorized Signature (Primary):	Date:
Joint Name: (If applicable)	
Authorized Signature (Joint):	Date: