

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS via ACH

Direct Payment is the use of funds for making a payment. Individuals or organizations can send or receive a Direct Payment as an ACH credit or debit. Any ACH payment that is not a Direct Deposit is a Direct Payment

I (we) hereby authorize Pleasantville Golf & Country Club, hereinafter called "COMPANY", to initiate debit entries to my (our) account at the financial institution listed below, hereinafter called DEPOSITORY. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. laws and regulations.

Depository Name \_\_\_\_\_ Branch \_\_\_\_\_
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Routing & Transit Number \_\_\_\_\_ Account Number \_\_\_\_\_

Account Type: [ ] Checking/Draft [ ] Savings/Share

Deduction Day: [ ] 15th of Month OR [ ] 30th of Month

Recurrence: [ ] 6 - Pay (May thru October)

All recurrence payments will be charged a \$5.00 service fee per payment.

All recurrence payments will be divided equally over the time period selected.

I (we) understand that should the regularly scheduled debit date fall on a weekend or Federal holiday, the debit shall occur on the following banking date.

This authorization 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 a time and manner as to afford COMPANY and DEPOSITORY a reasonable time to act upon it.

Account Holder Name(s) \_\_\_\_\_

Date \_\_\_\_\_ Signature(s) \_\_\_\_\_

Note: Written debit authorization must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization. This authorization is valid for the 2018 season only.



\*\*\* Please attach a voided check or financial institution account verification document to this form. \*\*\*