

#### **INSTRUCTIONS**

- 1. Complete the form and attach a VOID cheque.
- 2. Sign the form where indicated.
- 3. Advise us promptly of any changes to your account information.

## BUSINESS MEMBER DETAILS (PAYOR)

Company Name

**Company Address** 

### PAYEE INFORMATION

Name		
Address		
Home Telephone	Work Telephone	Payroll/Employee No.

# PAYEE BANKING INFORMATION

Financial Institution									
Branch Address									
Account Name		 			 		 	 	
Institution	Branch		Account Nu	mber					
0	0								

## □ Voided cheque attached to Direct Deposit Application (Required)

I consent to the collection, use, and disclosure of my personal information given herein for the purpose of setting up the Direct Deposit. I hereby authorize the above-named Payor to process direct deposits to the account specified in the PayeeBanking Information section.

X

Signature

Date

