



The BATON ROUGE SOCCER CLUB

142 Lobdell • Baton Rouge, LA 70806 • 225 924-2157 • Fax: 225 924-5674

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

I (we) hereby authorize the Baton Rouge Soccer Association, hereinafter called BRS A, to initiate debit/credit entries to my (our) checking account indicated below at the depository named below, hereinafter, called DEPOSITORY, to debit/credit the same to such account.

DEPOSITORY NAME _____

CITY _____ STATE _____ ZIP _____

ROUTING NUMBER _____

ACCOUNT NUMBER _____

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

NAME(S) _____
(Please Print)

DATE _____ SIGNED _____

I authorize BRS A to withdraw \$ _____ from the above account on the 17th day of each month
(amount) (day)
for _____ months with the first withdrawal on _____ & the final withdrawal on
(# of months, 6 max)

(no later than Jan. 17, 2010)

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVED MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

ANY DEBIT TRANSACTION NOT HONORED BY YOUR BANK IS SUBJECT TO A \$25 NSF FEE AND SUSPENSION OF THE PLAYER UNTIL PAYMENT IS MADE.

ATTACH VOIDED CHECK HERE

Providing quality soccer programs to the greater Baton Rouge area since 1975.