

**McLean Youth Soccer Association  
Payroll Direct Deposit Authorization**

Rev. 08 2010

This authorization remains in full force and effect until MYSA receives written notification from the employee of its termination or until MYSA deems it necessary to terminate the agreement.

Name (first, middle initial, last): \_\_\_\_\_  
*(same as bank account is titled)*

Email address: \_\_\_\_\_  
*(for receipt of payroll deposit verification by you)*

Type of account (if left blank will be processed as Checking): \_\_\_\_\_ Checking \_\_\_\_\_ Savings

Bank Name: \_\_\_\_\_

Bank Address (# & street, city, state, zip): \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_ Bank Account Number: \_\_\_\_\_

I authorize MYSA to provide for direct deposit of any compensation due me, less any authorized withholdings or deductions therefrom, in the above designated account. If at any time the amount of compensation so deposited exceeds the amount of compensation actually due to me, I authorize MYSA to either (a) withhold a sum equal to the overpayment from future compensation, or (b) recover such overpayment from the above designated account. If any action taken by me results in nonacceptance of a direct deposit by the designated financial institution, I understand that MYSA assumes no responsibility for processing a supplemental compensation payment until the amount of the non-accepted deposit is returned to MYSA.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Notes:**  
Bank Routing Number - The 9 digit number at the bottom left of your bank check or as provided by your bank.  
Bank Account Number - As provided at the bottom center of your bank check or on your account statement.