

Pay your billings from Rotary Club of Willmar by ACH

If you wish to utilize the option of paying your quarterly billings by ACH, please complete the following information and return to the address at the bottom of this form.

Bank Account ACH Authorization

Name _____

Address _____

City _____

State _____

Zip Code _____

Phone _____

E-mail address _____

Bank Account Information

Bank _____

Routing # _____ Acct # _____

checking or savings

Signature _____

I hereby authorize Rotary Club of Willmar to charge my quarterly billings as specified below to the bank account indicated above. I understand that the transaction will appear on my bank statement. I further understand that it is my responsibility to notify Rotary Club of Willmar if there are any changes to my bank account. This authorization remains in effect until I notify Rotary Club of Willmar in writing and the Rotary Club of Willmar has had a reasonable amount of time to fulfill my request. The Rotary Club of Willmar can terminate this agreement at any time.

Please check ONE of the options below:

Pay my quarterly DUES / MEALS & FOUNDATION DONATION by ACH.

Pay my FOUNDATION DONATION ONLY by ACH - my employer pays my quarterly dues / meals.

OTHER special circumstances (explain) _____

Signature _____

Date _____