



NAME: \_\_\_\_\_

This form need to be returned and signed ONLY if you are choosing the monthly savings/checking deductions. If you are making payment in full, there is no need to complete this form.

Member Information			
Item		Monthly Amt	Total Amount
2016-2017 Dues			\$ 295.00
One time processing fee (only if you are choosing monthly deductions)			\$5.00
<b>TOTAL</b>		<b>\$25.00 mo</b>	<b>\$300.00 total</b>

Twelve equal payments of \$25 due May through April through automatic withdrawal from a checking, savings, or credit card account. Payments can be made on either the 5th or the 20th of each month.

Withdrawal date (Choose one) 5th \_\_\_\_\_ 20th \_\_\_\_\_

I give Suburban Rotary permission to from my checking/savings/credit card (circle one) account each month. I understand that I am liable for the entire amount of annual dues (\$300) regardless of whether I terminate my membership early. Deductions will continue until the full amount has been paid.

**Rotarian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Payment with checking/savings account**  
Routing number \_\_\_\_\_  
Account number \_\_\_\_\_  
Name of bank \_\_\_\_\_

**Payment with credit card**  
Account number \_\_\_\_\_  
Billing Address \_\_\_\_\_  
Billing Zip Code \_\_\_\_\_ Exp Date \_\_\_\_\_  
3 digit security code \_\_\_\_\_