SPORTING LEE'S SUMMIT SC
AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT (ACH CREDITS)

I (we) hereby authorize Sporting Lee's Summit SC, hereinafter called COMPANY, to send credit entries to my (our) account indicated below at the financial institution named below, hereafter called FINANCIAL INSTITUTION, and to credit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Financial Institution
Name_____

Routing/Transit Number) _____

Account Number_____ Type of Acct: ___Checking ___Savings

Please attach a voided check or a copy of your savings account card to this document. If no check is available, please attach a document issued by your bank that shows your name, bank routing number and account number.

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

Name (Please Print) _____

Address _____

City _____ State_____ Zip _____

SSN or EIN_____

Signature_____ Date _____

E-mail_____ Phone #_____

Questions about this form can be directed to Jen Gordon; jen@ctcprofessionals.com.

Completed forms and attachments can be mailed to: Sporting Lee's Summit, ATTN: Jen Gordon, 705B SE Melody Lane PMB 303, Lee's Summit, MO 64063