

Direct Deposit Enrollment Request Form

Directions:

Authorization Agreement for automatic deposits (ACH credits)

- 1) Ensure entire form is complete, then sign and date.
- 2) Return the completed form to accounting@sterling.academy

I (we) authorize Sterling Academy of Plantation, Florida to initiate credit entries to my checking and/or savings accounts indicated below and to credit the same to such amount. I (we) acknowledge that the origination of the ACH transactions to my (our) account must comply with the provisions of U.S. Law.

Note: Funds can be deposited into one account or split between accounts as a set percent or dollar amount.

Account type	Checking	Savings	State Acct Opened
Account number			
ABA Routing Number			
Deposit Amount	% OR \$_	(Flat Amour	nt) OR Remaining
Account type	Checking	Savings	State Acct Opened
Account number			
ABA Routing Number			
Deposit Amount	% OR \$_	(Flat Amour	at) OR Remaining
Account type	Checking	Savings	State Acct Opened
Account number			
ABA Routing Number			
Deposit Amount	% OR \$_	(Flat Amour	nt) OR Remaining
If monies to which I am not entitled are deposited to my account, I authorize Sterling Academy (issuer) to direct the financial institution to return said funds and I authorize the financial institution to act on Sterling Academy's direction and to return said funds. This authority will remain in effect until Sterling Academy has received written notification from me of its termination in such time and in such manner as to afford Sterling Academy and the financial institution a reasonable opportunity to act on it.			
First Name	Middle Name	Last Nam	e
Address	City	State	Zip
Signature	Date	Phone Number	Notification Email Address

NOTE: Written credit authorization must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.