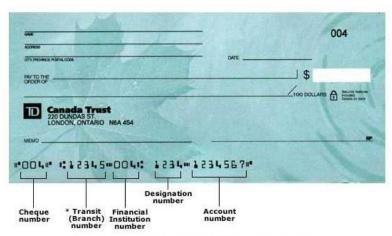
Pre-Authorized Debit (PAD) Form



By submitting this form, you are agreeing to allow FAST to debit your monthly fees directly from your bank account. You will always receive prior notification of the amount that will be debited before the due date (1st of each month, unless otherwise notified).

To discontinue PAD payments, please notify us via email at fastswimmingoffice@gmail.com; allowing 30 days to process this request.

Account Holder Name	
Name of Bank	
Bank # (can be found on personal cheque)	
Account # (can be found on personal cheque)	
Transit # (can be found on personal cheque)	



* Your branch number is the first 4 digits of this 5 digit sequence.

I, as the account holder, authorized FAST and my financial institution, to debit, in accordance with the Rules of the Canadian Payments Association my account as specified above, for the purposes of paying my FAST fees. The information set out above may be sent to FAST's bank and/or to your financial institution to implement this authorization.

A \$25 administration charge may be applied at FAST's discretion for returned or declined paymen
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Signature	Date	

Completed forms can be emailed to <u>fastswimmingoffice@gmail.com</u>, or dropped in the FAST mailbox on Marta's office door (Room A206).