

Automatic Withdrawal Authorization

New

Change

Cancel

I authorize Fox Communities Credit Union / Bridges Child Enrichment Center to debit my account selected below, weekly on Friday.

*Checking

Savings

*Please provide a voided check if account is a checking account.

In the amount of:

With a starting date of:

From (your account)...

Name on account:

Financial Institution:

Routing number:

Account number:

These funds will be received by Fox Communities Credit Union, routing number 275977256, for credit to Bridges Child Enrichment Center.

This authorization will remain in effect until Fox Communities Credit Union or Bridges Child Enrichment Center is notified in writing, in such time as to afford Fox Communities Credit Union a reasonable opportunity to act on it. In case of error, Fox Communities Credit Union must be contacted no later than 60 days after you receive your financial statement on which the error appeared.

Signature: _____

Date: _____