

**PAYROLL REGISTRATION DETAILS**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(Province)

\_\_\_\_\_  
(Postal Code)

**Phone Number:** \_\_\_\_\_ **Cell Number:** \_\_\_\_\_

**Signature** \_\_\_\_\_

**DIRECT DEPOSIT AUTHORIZATION AGREEMENT**

This Agreement allows Vancouver Musicians Association to directly deposit engagement fees into my bank account.

Please complete this information below and return it to the payroll department.

Be sure to include a cheque marked VOID for your chequing account. The details from the cheque will be used to verify the account details.

**BANKING DETAILS**

**Bank Name:** \_\_\_\_\_

**Bank Address:** \_\_\_\_\_

**Bank Telephone Number:** \_\_\_\_\_

**Account Number:** \_\_\_\_\_ **Transit Number:** \_\_\_\_\_ **Bank Number:** \_\_\_\_\_

I authorize VMA Local 145 to deposit directly to my account, indicated above. If funds for which I am not entitled are deposited to my account, I authorize VMA Local 145 to direct the financial institution to return said funds.

I understand that it is my responsibility to verify the payments have been credited to my account before I withdraw them and that VMA Local 145 assumes no liability for overdrafts for any reason.

I understand that it is my responsibility to inform VMA Local 145 of any change to my banking information.

Please be assured that this information will be kept confidential and only be used for the purpose of direct deposit.

**Musicians Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Attach Void Check / Deposit slip here