



• SWIM & RECREATION CLUB •

15231 LAKE HILLS BOULEVARD BELLEVUE, WASHINGTON 98007  
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**AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENTS (DEBITS)**

Company: SAMENA CLUB

Type of Account:  Checking  Savings

I (we) hereby authorize the above named company, hereinafter called COMPANY, to initiate debit entries to my (our) account identified below and the depository (bank) named below hereinafter called DEPOSITORY, to debit the same to said account.

Depository Name: \_\_\_\_\_ Branch \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Transit/Routing No. \_: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_: Account No. \_\_\_\_\_  
(first 9 numbers on bottom left of check)

This authority is to remain in full force and effect until COMPANY and DEPOSITORY have received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it. I (or either of us) have the right to stop payment of a debit entry by notification to DEPOSITORY at least three days prior to my (our) next payment. In case of an erroneous debit, provided I (we) supply notice to DEPOSITORY within 60 days of receiving my (our) account statement, the DEPOSITORY must investigate and resolve the error within 45 days, but if it has not done so within 10 days, my (our) account will be recredited for the amount in question while it finishes the investigation.

Membership Number \_\_\_\_\_

Primary Member Name (Please Print) \_\_\_\_\_

Primary Member Signature \_\_\_\_\_ Date Signed \_\_\_\_\_

Spouse if applicable:

Spouse Name (Please Print) \_\_\_\_\_

Spouse Signature \_\_\_\_\_ Date Signed \_\_\_\_\_

(ATTACH VOIDED CHECK)