



Dear Member:

This system is widely used in other industries and there is no cost to you. Simply complete the information below, attach one of your checks marked "void" and return both to our office.

I hereby authorize an automatic debit on the account designated below for the balance due amount indicated in my monthly statement by my marina. My account will be debited by an electronic bank draft on the first day of the next month for the charges indicated in that statement.

PLEASE PRINT THE FOLLOWING INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____

PHONE: () _____ WORK: () _____

BANK ROUTING # (9 DIGITS) _____ (The first row of 9 digits on the bottom left of your check)

ACCOUNT #: _____ (The next row of number on the bottom left of your check)

YOUR BANK NAME: _____

In accordance with banking regulations, I understand that any draft returned for insufficient funds will be electronically debited to my account, plus a return fee of \$25.00.

SIGNATURE

DATE

PLEASE INCLUDE VOIDED CHECK