

Please print legibly, especially with account numbers! Thank you.

Ohio University WellWorks-ACH/Direct Debit Authorization Form Individual Membership – 1 Year Option

Last name: _____ First name: _____ MI: _____ Last 4 of SSN: _____

Home address: _____
Street City State Zip

Home/Cell Phone: (____) _____ - _____ Email: _____

Financial Institution Information **USA banks only* Account type (pick one): ___Checking ___Savings

Bank name: _____

Routing number: _____ Account number: _____

First month payment **\$24.00** paid by: ___ Check # _____ ___ Credit Card/type: Visa MC AmEx Discvr
Remaining 11 payments \$16.00/month to begin: ___/10/_____ [Deductions start the NEXT month.]

I authorize eleven (11) scheduled payments to be made from my checking or savings account indicated above to Ohio University WellWorks. My payments will be made automatically on the 10th day of each month, and proof of payment will appear on my bank statement. I agree that no prior notification will be provided unless the date or amount changes, in which case I will receive notice from Ohio University WellWorks at least ten (10) days prior to the payment being collected. The authority I am hereby giving to charge my account will remain in effect until I notify Ohio University WellWorks in writing at wellworks@ohio.edu to terminate the authorization or until I provide new account information by the 20th of the month. To change a reoccurring ACH/direct debit transaction I understand I must provide notice to Ohio University WellWorks by the 20th of the month for changes to be reflected on the next consecutive month. **Cancellation of membership will not be accepted prior to one year from start date.**

**The Office of the Bursar will charge \$25.00 for debits returned due to non-sufficient funds.*

Signature: _____ Date: _____

WELLWORKS STAFF ONLY: _____ WS initials

___ Filled in deduction date ___ Signature of Member

___ Yellow copy given to Member

___ SCAN white copy and upload into Member's file

___ White/original copy given to Cyndi for OU Bursar

___ At POS: discount \$176, paying \$24.

For Bursar use only:

Date of entry: ___/___/___ Initials: _____

WellWorks Account:

10-100000-550100-0000-30-471122