



## Macaulay Tree House Day Nursery

42 The Granite Bluff Bracebridge, ON P1L 1L4

Phone: (705) 645-1956 fax: (705) 645-5846

Email: [admin@macaulaytreehouse.ca](mailto:admin@macaulaytreehouse.ca)

### Pre-Authorized Direct Withdrawal Agreement Form

#### AUTHORIZATION AGREEMENT

I hereby authorize Macaulay Tree House to initiate automatic withdrawals from my account at the financial institution named below.

This agreement will remain in effect until Macaulay Tree House receives a written notice of cancellation from me or my financial institution, or until I submit a new direct withdrawal form to the Payroll Department.

#### ACCOUNT INFORMATION

Institution number (3 digits) \_\_\_\_\_

Transit Number (5 digits) \_\_\_\_\_

Account Number \_\_\_\_\_

Chequing |  Savings

#### SIGNATURE

Name (please print): \_\_\_\_\_

Authorized Signature (Primary): \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signature (Joint): \_\_\_\_\_ Date: \_\_\_\_\_

Please attach a void cheque or deposit slip and return this form. Thank you.