

Account holder signature \_\_\_\_\_

## **Society for Talent Education**

10310 - 56 ST NW, Edmonton AB T6A 2J2 Ph 780-469-7382 Fax 780-463-8222 www.ste-suzukistrings.org

## **Automatic Withdrawal Payment Agreement**

	Add	ess		
one		Postal Cod	de	
ristration Fee				
reby authorize the Society for Talent Educ		-	e amount of 💲	<b>5125</b> by method (
tronic Funds transfer on the <b>1<sup>st</sup> day of July</b>	y, for registration fee			
nation (Yes) (No)				
reby authorize the Society for Talent Educ		-		<b>250</b> by method (
ctronic Funds transfer on the <b>1<sup>st</sup> day of Sep</b>	<b>stember</b> , for donation	in lieu of volunt	eering.	
<b>unteer Deposit (If you choose to voluntee</b> reby authorize the Society for Talent Educ ctronic Funds transfer on the <b>23<sup>rd</sup> day of Ju</b>	ation the debiting of			
nual Fee				
son fees (please list the amount for each child)	\$	\$	\$	
rument Rental(s)	\$	\$	\$	
reby authorize the Society for Talent Educ thod of Electronic Funds transfer on the <b>1</b> st		my account in th	e total amour	nt of \$
nthly Fees				
son fees (please list the amount for each c	:hild) \$	\$_		\$
rument Rental(s)	\$	\$		\$
reby authorize the Society for Talent Educ	ation the debiting of	my account in th	e total amour	nt of \$
thod of Electronic Funds transfer on the <b>1</b> st	t day of each month,	September to Ju	ine.	
ne payer, may revoke this authorization by	providing <b>15 days' w</b>	<b>ritten notice</b> to	the STE Office	
	a VOID cheque		,,	
-	•	accust #		
ık Route # Bank Transit # _	A	ccount #		
ne of Bank				
		Postal Cod	de	
ık Address				
k Addressvectorial recourse rights if any debit does not				

Date \_\_\_\_