
PAYROLL DEDUCTION AUTHORIZATION

Please print clearly

Date: _____

AIS#: _____

Name: _____
First Last Middle

Department _____ Email _____

Campus Address _____

Campus Phone _____

Pay Cycle (check one). ☐ Bi- Weekly ☐ Monthly ☐ Semi-Monthly

*Please note you **MUST** be a 12-month Full time employee to sign-up for Payroll Deduction.*

I understand and agree to the following terms of an Electronic Funds Transfer (EFT) deduction membership:

- The monthly deduction amount will be \$ _____
- I am a Full time SIU employee (12 months a year).
- There is a required 3-month participation minimum from the time your first deduction is deducted.
- This rate is subject to change annually on July 1st in correlation with any increase in Student Recreation Center membership rates.
- This membership is perpetual; therefore deductions will continue until I terminate in writing or email to the Recreational Sports and Services Member Services Office.
- Should I wish to terminate my payroll deduction, or if my University compensation stops for any reason (leave of absence, workman's comp, termination, etc.), it is my responsibility to notify the Recreational Sports and Services Member Services Office in writing or email.
- Depending on the date of my written request and University payroll deadlines, I understand I may be subject to additional deductions following my termination request.
- No refunds/credit will be issued for previous deductions or non-use of the facility.

I authorize Southern Illinois University Carbondale (Department of Recreational Sports and Services) to deduct from my pay each payroll period the proper amount in recurring amounts for Student Recreation Center membership fees.

Signature

Date