



KSUSA Direct Deposit Authorization

- Please complete this form and return it to Kansas Youth Soccer Association.
- Be sure to include a voided check from your checking account and/or a deposit slip for your savings account, whichever is applicable. The details from the check / deposit slip will be used to verify the account details.

Name:
Your Bank / Financial Institution:
Primary Account Number:
Bank Routing Number (ABA Number):
Please check the applicable option:
** Checking_____ Savings_____ **

I authorize Kansas Youth Soccer Association and the above Financial Institution to deposit my wages automatically into my account, and to initiate any necessary adjustments for entries made in error to my account.

*Signature: _____ Date: _____ *

Attach Voided Check / Deposit Slip here
