University of North Texas Pohl Recreation Center Payroll Deduction Agreement - Spring Semester

Sales Date:					
Department:		Work Phone:			
FACULTY & STAFF/	PLUS ONE/DEPENDENT MEMBERSH	IP:			
F/S Member Name	:				
Member 2 Name:_		Relation:			
Member 3 Name:_					
Membership Dura	tion (Circle One per Member):				
F/S Mem:	2 Semesters thru 8/9/19	1 Semester thru 5/11/19			
Mem 2:	2 Semesters thru 8/9/19	1 Semester thru 5/11/19			
Mem 3:	2 Semesters thru 8/9/19	1 Semester thru 5/11/19			
Mem 4:	2 Semesters thru 8/9/19	1 Semester thru 5/11/19			
Pricing (per memb	ership):				
2 Semeste	r:\$185 (or \$135.50 after March 17)	1 Semester:\$99 (or \$49.50 after March 17)			

Add-ons (C	dd-ons (Circle One per Member) ***Length of service must be the same as membership								
Locker Service									
				2 Sem Bottom			1 Sem Bottom		
F/S Mem:	No Locker	2 Sem Full \$55	2 Sem Top \$35	\$30	1 Sem Full \$45	1 Sem Top \$25	\$20		
				2 Sem Bottom			1 Sem Bottom		
Mem 2:	No Locker	2 Sem Full \$55	2 Sem Top \$35	\$30	1 Sem Full \$45	1 Sem Top \$25	\$20		
				2 Sem Bottom			1 Sem Bottom		
Mem 3:	No Locker	2 Sem Full \$55	2 Sem Top \$35	\$30	1 Sem Full \$45	1 Sem Top \$25	\$20		
				2 Sem Bottom			1 Sem Bottom		
Mem 4:	No Locker	2 Sem Full \$55	2 Sem Top \$35	\$30	1 Sem Full \$45	1 Sem Top \$25	\$20		
Towel Service									
F/S Mem:	No Towel Service		2 Semester \$20		1 Semester \$10				
Mem 2:	No Towel Service		2 Semester \$20		1 Semester \$10				
Mem 3:	No Towel Service		2 Semester \$20		1 Semester \$10				
Mem 4:	No Towel Service		2 Semester \$20		1 Semester \$10				

Membership Total: \$_____

Locker Total: \$_____

Towel Total: \$_____

Grand Total: \$_____



(go to back of form)

Fusion Order #:_____



What is your employment status with the University of North Texas? (Please circle one)

9-Month 12-Month

Office Use Only:		
Month/year of 1st	deduction:	Month/year of last deduction
Fall/Spring = lo received by end o	ast pull 6/1). Last of business on the ted 10/1). If the d	after the end of the purchased membership period (i.e. Fall only = last pull 1/1; actions for Annual/Summer memberships will occur on 8/1. If deduction form is of the month, the first deduction will be on the 1st of the next month (i.e. sold on ion form is received after the 10th of the month, the first deduction will be on the months away (i.e. sold on 9/17, deducted on 11/1).***
Grand Total:	\$	
Total # of Deduction	ons:	
Amount/Deductio	n: \$	

I hereby authorize the University of North Texas Payroll Office to deduct a monthly fee from my check to pay for my Pohl Recreation Center membership and/or locker and/or towel service. In order to cancel the deduction, I understand that I will need to contact the Recreational Sports Office (Pohl Rec Center, Room 103) to sign the appropriate forms to stop my membership and/or locker and/or towel service. I understand that cancellation of the deduction will go into effect the month after my completing all of the necessary steps with the Recreational Sports Office. I understand that I must cancel the deduction through the Recreational Sports Office by the 10th of the month prior in order to have the deduction stopped by the next pay period. Deductions will only be taken for those months designated above.

I understand, based on timing of deductions, if I cancel my payroll deduction prior to any deductions being made, I will be charged for the amount of time used up to that point.

I understand and agree that if for any reason there are insufficient funds to cover the authorized deduction in any given month, then a double deduction will take place the following month and increased deductions will continue until the amount owed is paid in full.

Participants must fill out a payroll deduction form each time they renew their membership and/or locker and/or towel service.

Employee Signature

Date



940 • 565 • 2275 940 • 369 • 8347 recsports.unt.edu RECREATIONAL SPORTS