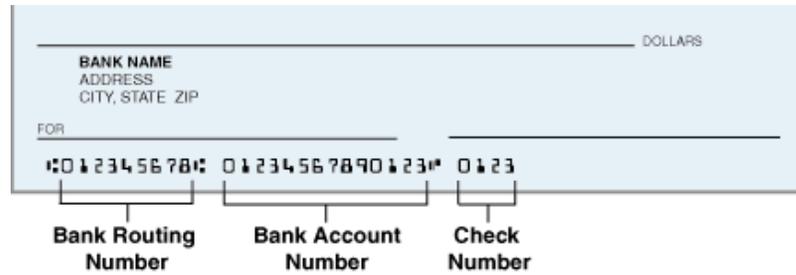




CAZADERO PERFORMING ARTS CAMP EMPLOYEE DIRECT DEPOSIT ENROLLMENT FORM

To enroll in Full Service Direct Deposit, simply fill out this form and return it to our Berkeley Office. **Attach a voided check** for each checking account - **not a deposit slip**. If depositing to a savings account, ask your bank to give you the Routing/Transit Number for your account. It isn't always the same number as on a savings deposit slip. This will help ensure that you are paid correctly.

Below is a sample check detailing where the information necessary to complete this form can be found.



ACCOUNT INFORMATION

Please print legibly

Make sure to indicate what type of account, along with amount to be deposited, if less than your total net paycheck.

1. Bank Name/City/State: _____

Checking Savings Other

Routing/Transit #: _____ Account #: _____

I wish to deposit: \$ _____ or Entire amount

2. Bank Name/City/State: _____

Checking Savings Other

Routing/Transit #: _____ Account #: _____

I wish to deposit: \$ _____ or Entire amount

Important! Please read and sign before completing and submitting.

I hereby authorize Automatic Data Processing, Inc. (ADP) to deposit any amounts owed me, as instructed by my employer, by initiating credit entries to my account at the financial institution thereafter "Bank" indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by ADP to my account. In the event that ADP deposits funds erroneously into my account, I authorize ADP to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until ADP and Bank have received written notice from me of its termination in such time and in such manner as to afford ADP and Bank reasonable opportunity to act on it.

Employee Name: _____

Employee Signature: _____ Date: _____