Direct Deposit Authorization Agreement

Purse Payments

Internal Use Only-Horsemen Account #:



Authorization Agreement

I hereby authorize **Meadowlands Racetrack** to initiate automatic deposits to my account at the financial institution named below.

Further, I agree not to hold **Meadowlands Racetrack** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution, or due to an error on the part of my financial institution in depositing funds into my account.

This authorization will remain in effect until **Meadowlands Racetrack** receives written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Horsemens' Bookkeeper.

A separate Direct Deposit Authorization Agreement must be completed for every partnership.

Please attached a voided check (for deposit to a checking account) or a savings account deposit slip (for deposit to a savings account) for verification of your pay distribution requests.

to a savings account) for verification of your pay distribution requests.	
Account Information	
Bank Name	
Name of Account	
Routing / Transit #	Checking
Account #	Savings
Personal Inforn	nation
Name:	
Address:	
Phone:	
Email:	
Signature(s)	
Authorized Signature (Primary):	Date:
Authorized Signature (Joint):	Date:
**Only one (1) signature required	
Please attach a voided check or deposit slip and return this form to the Horsemens' Bookkeeper:	
Meadowlands Racetrack Attn: Horsemens' Bookkeeper 1 Racetrack Drive East Rutherford, NJ 07073	Email: horsebook@playmeadowlands.com Fax: (201) 356-4811
Check One:	
Initial Direct deposit Please cancel my current direct deposit and use this form for my new direct deposit information Please cancel all existing direct deposits (this will result in my receiving a live Purse check)	