



EDMONTON PIPE TRADES EDUCATIONAL TRUST FUND

16120-118 Avenue, Edmonton, Alberta T5V 1C6

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR CREDIT TRANSFER

INITIAL REQUEST CHANGE REQUEST

MEMBER PERSONAL INFORMATION

NAME:

UNION CARD NUMBER:

EMAIL ADDRESS:

REQUEST FOR DIRECT DEPOSIT OF BENEFITS

To request direct deposit or to modify your banking information, **PLEASE ENCLOSE A VOID CHEQUE** with this request AND complete the information below. In both cases, please sign the authorization.

DEPOSIT TO (NAME OF BANK OR FINANCIAL INSTITUTION)

ADDRESS OF BRANCH

Branch Number	Institution Number	Account Number
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AUTHORIZATION:

I authorize the Edmonton Pipe Trades Trust Fund and ATB to use the services of any member or affiliate of the Canadian Payments Association (CPA) in carrying out this authorization. I agree to be bound by the standards, rules, and practices of CPA as they may exist from time to time. I agree to give written notice of cancellation of this authorization to Edmonton Pipe Trades Educational Trust Fund and be bound by this authorization until the Edmonton Pipe Trades Educational Trust Fund has had reasonable time to act on the notice. Edmonton Pipe Trades Educational Trust Fund and/or ATB may terminate this authorization by providing me with ten (10) days' notice. I undertake to inform Edmonton Pipe Trades Educational Trust Fund within five (5) days of any changes to branch, account, and institution number while this authorization is in effect.

SIGNATURE Date:(MM/DD/YYYY) _____

REQUEST TO SUBSCRIBE TO E-NOTIFICATION RECEIVED FOR DIRECT DEPOSIT