

Direct Deposit Authorization Agreement

- Please check box if you are a returning Horsemen and Direct Deposit information is the same as prior year.
** If banking information changed please submit a New Direct Deposit Form.

Authorization Agreement

I hereby authorize MGM Northfield Park to initiate automatic deposits to my account at the financial institution named below.

Further, I agree not to hold MGM Northfield Park responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or my financial institution or due to an error on the part of my financial institution in depositing funds to my account. If monies to which I am not entitled are deposited to my account, I authorize MGM Northfield Park to direct the financial institution to return said funds and I authorize the financial institution to act on MGM Northfield Park's direction and to return said funds .

This agreement will remain in effect until MGM Northfield Park received a written noticed of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Horsemen's Bookkeeper.

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

Please attach a voided check for verification of your pay Distribution request.

Account Information

Name of Financial Institution (US only): _____
Routing Number: _____ Account Number: _____

- Checking Savings
 Personal Account Company Account

Personal Information

Name on Account: _____
Address: _____
Phone #: _____
Email: _____

(Please note a valid email is required so an automatic statement can be sent via email after a deposit is initiated)

Signatures

Authorized Signature: _____ Date: _____
(Primary)
Authorized Signature: _____ Date: _____
(Joint)
Authorized Signature: _____ Date: _____
(Joint)