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

Sales Date:______________________________________________________
Employee Name:_________________________________________________
UNT ID #:_________________________
Department:_____________________________________________________
Work Phone:______________________
Email:_________________________________________________________________________________________________

FACULTY & STAFF/PLUS ONE/DEPENDENT MEMBERSHIP:

F/S Member Name:_______________________________________________
Member 2 Name:_________________________________________________
Member 3 Name:_________________________________________________
Member 4 Name:_________________________________________________
Relation:__________________________
Relation:__________________________
Relation:__________________________
Relation:__________________________

Membership Duration (Circle One per Member):

<table>
<thead>
<tr>
<th>F/S Mem:</th>
<th>F/S Mem:</th>
<th>Mem 2:</th>
<th>Mem 3:</th>
<th>Mem 4:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual thru 8/9/19</td>
<td>2 Semesters thru 5/11/19</td>
<td>1 Semester thru 12/23/18</td>
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Pricing (per membership):

Annual:$264 ($214.50 after October 21)
2 Semester:$198 ($148.50 after October 21)
1 Semester:$99 ($49.50 after October 21)

Add-ons (Circle One per Member) ***Length of service must be the same as membership length.***:

**Locker Service**

<table>
<thead>
<tr>
<th>F/S Mem:</th>
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<th>Mem 2:</th>
<th>Mem 3:</th>
<th>Mem 4:</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Locker</td>
<td>Annual Full $65</td>
<td>Annual Top $45</td>
<td>Annual Bottom $40</td>
<td>2 Sem Full $55</td>
</tr>
<tr>
<td>No Locker</td>
<td>Annual Full $65</td>
<td>Annual Top $45</td>
<td>Annual Bottom $40</td>
<td>2 Sem Full $55</td>
</tr>
<tr>
<td>No Locker</td>
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<tr>
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<td>Annual Bottom $40</td>
<td>2 Sem Full $55</td>
</tr>
</tbody>
</table>

**Towel Service**

<table>
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<tr>
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<th>Mem 2:</th>
<th>Mem 3:</th>
<th>Mem 4:</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Towel Service</td>
<td>Annual $30</td>
<td>2 Semester $20</td>
<td>1 Semester $10</td>
<td></td>
</tr>
<tr>
<td>No Towel Service</td>
<td>Annual $30</td>
<td>2 Semester $20</td>
<td>1 Semester $10</td>
<td></td>
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Membership Total: $____________________
Locker Total: $____________________
Towel Total: $____________________
Grand Total: $____________________ (go to back of form)
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______________________

***Deductions must end the month after the end of the purchased membership period (i.e. Fall only = last pull 1/1; Fall/Spring = last pull 6/1). Last deductions for Annual/Summer memberships will occur on 8/1. If deduction form is received by end of business on the 10th of the month, the first deduction will be on the 1st of the next month (i.e. sold on 9/3, then deducted 10/1). If the deduction form is received after the 10th of the month, the first deduction will be on the 1st, but two months away (i.e. sold on 9/17, deducted on 11/1).***

Grand Total:  $__________________
Total # of Deductions:  __________________
Amount/Deduction:  $__________________

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