

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

Fusion Order #: _____

Sales Date: _____

Employee Name: _____

UNT ID #: _____

Department: _____

Work Phone: _____

Email: _____

FACULTY & STAFF/PLUS ONE/DEPENDENT MEMBERSHIP:

F/S Member Name: _____

Member 2 Name: _____

Relation: _____

Member 3 Name: _____

Relation: _____

Member 4 Name: _____

Relation: _____

Membership Duration (Circle One per Member):

F/S Mem:	Annual thru 8/7/20	2 Semesters thru 5/9/20	1 Semester thru 12/23/19
Mem 2:	Annual thru 8/7/20	2 Semesters thru 5/9/20	1 Semester thru 12/23/19
Mem 3:	Annual thru 8/7/20	2 Semesters thru 5/9/20	1 Semester thru 12/23/19
Mem 4:	Annual thru 8/7/20	2 Semesters thru 5/9/20	1 Semester thru 12/23/19

Pricing (per membership):

Annual: \$264 (\$214.50 after October 20) 2 Semester: \$198 (\$148.50 after October 20) 1 Semester: \$99 (\$49.50 after October 20)

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

Locker Service

F/S Mem:	No Locker	Annual Full \$65	Annual Top \$45	Annual Bottom \$40	2 Sem Full \$55	2 Sem Top \$35	2 Sem Bottom \$30	1 Sem Full \$45	1 Sem Top \$25	1 Sem Bottom \$20
Mem 2:	No Locker	Annual Full \$65	Annual Top \$45	Annual Bottom \$40	2 Sem Full \$55	2 Sem Top \$35	2 Sem Bottom \$30	1 Sem Full \$45	1 Sem Top \$25	1 Sem Bottom \$20
Mem 3:	No Locker	Annual Full \$65	Annual Top \$45	Annual Bottom \$40	2 Sem Full \$55	2 Sem Top \$35	2 Sem Bottom \$30	1 Sem Full \$45	1 Sem Top \$25	1 Sem Bottom \$20
Mem 4:	No Locker	Annual Full \$65	Annual Top \$45	Annual Bottom \$40	2 Sem Full \$55	2 Sem Top \$35	2 Sem Bottom \$30	1 Sem Full \$45	1 Sem Top \$25	1 Sem Bottom \$20

Towel Service

F/S Mem:	No Towel Service	Annual \$30	2 Semester \$20	1 Semester \$10
Mem 2:	No Towel Service	Annual \$30	2 Semester \$20	1 Semester \$10
Mem 3:	No Towel Service	Annual \$30	2 Semester \$20	1 Semester \$10
Mem 4:	No Towel Service	Annual \$30	2 Semester \$20	1 Semester \$10

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 _____

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



RECREATIONAL SPORTS
www.recsports.unt.edu
940-565-2275 | 940-369-8347

UNT
EST. 1890