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 | 2 Semesters thru 8/7/20 | 1 Semester thru 5/9/20 |
| Mem 2: | 2 Semesters thru 8/7/20 | 1 Semester thru 5/9/20 |
| Mem 3: | 2 Semesters thru 8/7/20 | 1 Semester thru 5/9/20 |
| Mem 4: | 2 Semesters thru 8/7/20 | 1 Semester thru 5/9/20 |

Pricing (per membership):
2 Semester: $185 (or $135.50 after March 15) 1 Semester: $99 (or $49.50 after March 15)

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

**Locker Service**
| F/S Mem | No Locker | 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 | 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 | 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 | 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 | 2 Semester $20 | 1 Semester $10 |
| Mem 2: | No Towel Service | 2 Semester $20 | 1 Semester $10 |
| Mem 3: | No Towel Service | 2 Semester $20 | 1 Semester $10 |
| Mem 4: | No Towel Service | 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:**

1st deduction with paycheck dated: ________________

Last deduction with paycheck dated: ________________

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