



INSTRUCTIONS

- 1. Complete the form and attach a VOID cheque.
- 2. Sign the form where indicated.
- 3. Advise us promptly of any changes to your account information.

MEMBER INFORMATION

Member Name
Address

PAYOR INFORMATION

Name		
Address		
Telephone	Email	Comments:

I hereby authorize the above-named Payor to process pre-authorized debits from the account specified in the Banking Information section.

X	
Signature	Date

MEMBER'S BANKING INFORMATION

Financial Institution																
Korean (Toronto) Credit Union Limited																
Branch Address																
180 Steeles Ave. West Unit 3, Thornhill ON L4J 2L1																
Account Name																
Institution				Branch				Account Number								
0	8	2	8	2	0	7	8	2	0	0					1	1

☐ Voided cheque attached to Direct Deposit Application **(Required)**