

KINGDOM KIDS ACADEMY

PERFORMING & VISUAL ARTS

NEW HIRE DIRECT DEPOSIT FORM

TEAM MEMBER FULL LEGAL NAME	
TEAM MEMBER ID NUMBER	

COMPLETE TO ADD/ CHANGE DEPOSITING BANK ACCOUNTS

CHECKING	SAVINGS	ACCOUNT HOLDER NAME
%	%	ROUTING # _____
BANK NAME		
CHECKING #		
SAVINGS #		
CHECKING #		
SAVINGS #		

AUTHORIZATION	SIGN:
---------------	-------

I AUTHORIZE MY EMPLOYER – KINGDOM KOMPANIES LLC – DBA KINGDOM KIDS ACADEMY FOR PERFORMING & VISUAL ARTS TO DEPOSIT MY EARNINGS INTO THE BANK ACCOUNTS SPECIFIED ABOVE AND, IF NECESSARY, TO ELECTRONICALLY DEBIT MY ACCOUNT TO CORRECT ERRONEOUS ENTRIES. I CERTIFY MY ACCOUNT(S) & ALLOW THESE TRANSACTIONS. FURTHERMORE, I CERTIFY THAT THE ABOVE LISTED ACCOUNT NUMBER ACCUREATELY REFLECTS MY INTENEDED RECEIVING ACCOUNT. I AGREE THAT DEPOSIT TRANSACTIONS I AUTHORIZE COMPLY WITH ALL APPLICABLE LAWS. MY SIGNATURE BELOW INDICATES THAT I AM AGREEING THAT I AM EITHER THE ACCOUNT HOLDER OR HAVE THE AUTHORITY OF THE ACCOUNTHOLDER TO AUTHORITY OF THE ACCOUNTHOLDER TO AUTHORIZE MY EMPLOYER TO MAKE DIRECT DEPOSITS INTO THE NAMES ACCOUNT.

DATE		TEAM MEMBER NAME & SIGNATURE	
DATE		EMPLOYER REP. NAME & SIGNATURE	

PLEASE SIGN IN ONLY BLUE OR BLACK INK