



FOR YOUTH DEVELOPMENT™
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA PAYROLL DEDUCTION AUTHORIZATION

I hereby authorize **Granbury ISD** to deduct my YMCA membership dues through monthly payroll deductions in the amount indicated below. This deduction will continue until I notify the YMCA in writing to discontinue. A thirty-day notice is required.

NEW _____ **CHANGE** _____ **CANCEL** _____

Please circle the membership type and rate to be deducted below.

<u>MEMBERSHIP TYPE</u>	<u>RATES</u>
Individual/Adult	\$38
Household (1)	\$62
Household (1) +1	\$78
Household (2)	\$57
Household (2) +1	\$73
Young Adult	\$30
Senior Individual	\$30
Senior Couple	\$46

PRINTED NAME

EMPLOYEE ID# **OR** Date of Birth

SIGNATURE

DATE

Home Branch: _____

Member ID# _____

Rates shown reflect the current membership fees. YMCA Member will be notified of rate increase and payroll deduction will be changed automatically.

Please Initial _____