



# RECREATION & WELLNESS CENTER

## PAYROLL DEDUCTION AUTHORIZATION

Name \_\_\_\_\_  
\_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_  
\_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_ Fax Number: (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_

**START DEDUCTIONS**     **STOP ALL DEDUCTIONS**     **CHANGE EXISTING DEDUCTIONS**

### Rules and Terms Applicable to Payroll Deduction Authorization

I hereby authorize a deduction from my salary in the amount of \$ \_\_\_\_\_, payable to the Recreation and Wellness Center. This amount shall be deducted from my salary beginning with the very next payday and continuing each month thereafter.

This authorization shall cease under the following conditions:

- (a) upon written cancellation notice to Recreation and Wellness Center
- (b) automatically upon termination as an employee of Texas Southern University

I further agree to release my employer (Texas Southern University) from any liability resulting from this transaction.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I HAVE READ AND UNDERSTAND THE RULES AND TERMS STATED ON THIS AUTHORIZATION FORM AS ATTESTED BY MY SIGNATURE