



Team Member Direct Deposit

GUIDELINES

- To take advantage of direct deposit, the team member must complete and sign the enrollment form below. A separate enrollment form must be completed for each deposit account into which the team member wishes to direct funds. The team member must provide his or her Operator with a voided check for each bank account(s) along with the signed enrollment form(s).
- Once enrolled, the team member will continue receiving his or her net pay by check until the team member's bank completes the pre-notification process of verifying the team member's bank account number and bank routing number.
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PAYROLL DIRECT DEPOSIT ENROLLMENT AUTHORIZATION

Name _____ Date _____

I hereby authorize **Robert Hewes d/b/a Chick-fil-A of Chicopee FSU** to provide for direct deposit of any wages or compensation due me, less any mandatory or authorized withholding or deductions, in the below designated account(s).

- **Team members employed by franchised Operators:** If at any time the amount of wages or compensation so deposited exceeds the amount of wages actually due and payable to me, I authorize my franchised Operator-employer, or Chick-fil-A, Inc. as payroll processor for my franchised Operator-employer, to withhold a sum equal to the overpayment from my future wages.
- **Team members employed by Chick-fil-A, Inc.:** If I am employed at a Chick-fil-A, Inc. Company-operated location, then at any time the amount of wages or compensation so deposited exceeds the amount of wages or compensation actually due and payable to me, then I authorize Chick-fil-A, Inc. as my employer to withhold a sum equal to the overpayment from my future wages or compensation.

If any action taken by me results in non-acceptance of a direct deposit by the designated financial institution(s), I understand that neither my franchised Operator-employer (if applicable) nor Chick-fil-A, Inc. assume responsibility for processing a supplemental salary or wage payment until the amount of the non-acceptance deposit is returned by the financial institution.

Accounts:

Type of Account (Checking or Savings)	Account Number	Routing Number (9 digit number)	Name of Financial Institution	Amount to Deposit (Entire check, specific dollar amount, or percentage of check)

Please attach a voided check for each checking account.

Your Direct Deposit will continue to be deposited into your designated account(s) until Chick-fil-A, Inc. is notified by you or your franchised Operator-employer that you wish to re-designate your account(s). **Please do not close an account listed above without your or your franchised Operator-employer giving the Payroll Processing Department at Chick-fil-A, Inc. at least two weeks prior written notice and providing the necessary alternative deposit instructions.**

Team Member Signature

Date