



Student Refund Direct Deposit Enrollment Form

To enroll in Direct Deposit, simply fill out this form and return to the Student Accounts Office with a voided check attached.

DIRECT DEPOSIT AUTHORIZATION

STUDENT
NAME _____

STUDENT
ID NUMBER _____

I hereby authorize LIFE UNIVERSITY, to initiate credit entries to my checking account and Financial Institution indicated below.

This authority is to remain in full force and effective until LIFE UNIVERSITY has received written notification from me of its termination in such time and in such manner as to afford Life University a reasonable opportunity to process requested action.

NAME OF FINANCIAL INSTITUTION _____

CITY _____ STATE _____ ZIP CODE _____

ROUTING ACCOUNT
NUMBER _____ NUMBER _____

DATE _____ STUDENT'S SIGNATURE _____

CHECKING ACCOUNT ONLY

No starter checks

*******ATTACH A VOIDED CHECK*******