

MEMBER ACCOUNT AGREEMENT AND AUTHORIZATION TO DEBIT/CREDIT

MEMBER NAME _____ BRANCH _____ CO. CODE _____

MEMBER agrees to one of the debit methods listed below for collection of (1) membership dues for the Benefit Advisors Network (BAN), and/or (2) other applicable financial obligations to BAN. Such debits will be initiated by BAN out of MEMBER'S applicable account specified below (the "DDA Account") at the financial institution specified below ("BANK").

DEBIT METHOD (Check Applicable Box): **Note: (ACH method will be used to collect all service fees.)**

ACH or PRE-AUTHORIZED DRAFT (BANK is authorized to charge the DDA ACCOUNT)

BANK INFORMATION: **Checking Account** **Savings Account**

BANK Transit/ABA #	BANK Account (DDA) #
BANK Name	
BANK Address	
MEMBER Tax ID Number (TIN)	

ACH or PRE-AUTHORIZED DRAFT

MEMBER understands that funds representing the total of MEMBER's dues and/or other financial obligations to BAN must be on deposit in the applicable DDA Account no later the first of every month. BAN will initiate a transfer of such funds out of such DDA account on such date.

NOTICE

MEMBER acknowledges that if sufficient funds are not available by the date required pursuant to the foregoing provisions of this Agreement, BAN services may, at BAN's option, be immediately terminated. Member further acknowledges that neither BANK nor BAN will have any further obligation to MEMBER or any third party with respect to any such Services and BAN may take such action as it deems appropriate to collect outstanding financial obligations of MEMBER to BAN.

In consideration of BANK's compliance with this authorization, MEMBER agrees that BANK's treatment of any charge, and BANK's rights with respect thereto, shall be the same as if the charge were initiated personally by MEMBER, and that if any charge is dishonored, whether with or without cause, BANK shall be under no liability whatsoever. **In addition, MEMBER authorizes BAN to credit the DDA ACCOUNT when necessary, at BAN's sole discretion, for any refund or credit amount due MEMBER.**

In the event of any conflict between the terms and conditions of this Agreement and the terms and conditions of any member agreement, or BAN Terms and Conditions attached to any proposal given to MEMBER, this Agreement shall control.

This authorization shall remain in effect unless and until revoked in writing by an authorized representative of MEMBER, and until BANK and BAN have each received such notice and have had reasonable time to act upon such notice.

MEMBER Signature _____ DATE _____

MEMBER Representative Name & Title

(Must be an authorized signatory on the accounts listed above)

Attach a blank, voided check
