



# Direct Payment Program Sign Up Form

**Please complete and submit this form to enroll in the Direct Payment Program.**

If we do not have ACH account information on file for your annual dues payment, please consider signing up for the Direct Payment Program. In order to keep operating costs low, we ask that you use the ACH system to pay your dues. Please complete the information below and either email or fax this form back to our offices. Please note that any returns will be charged a return fee of \$25.00.

## GENERAL INFORMATION

Company Name: \_\_\_\_\_

Your Name: \_\_\_\_\_

Your Title: \_\_\_\_\_

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

City, State, ZIP: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

## ACCOUNT INFORMATION

Routing Transit Number (RTN): \_\_\_\_\_

Account Number: \_\_\_\_\_

Select Type of Account:  DDA  General Ledger

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

**SUBMIT THIS FORM TO:**

**Member Services**

**E-mail: [memberservices@wespay.org](mailto:memberservices@wespay.org)**

**Fax: (415) 433-1370**