

# NORWALK PARKS & RECREATION DEPARTMENT

## ERNSTHAUSEN RECREATION CENTER

100 REPUBLIC ST. • NORWALK OH 44857 • 419-663-6775 • [LRAMSEY@NORWALKOH.COM](mailto:LRAMSEY@NORWALKOH.COM)

### ELECTRONIC FUND TRANSFER APPLICATION

#### NEEDED INFORMATION TO SUBMIT APPLICATION:

- ☐ This form completed & signed - **BOTH SIDES**.
- ☐ Proof of discounts, if applicable.
  - \*Live or work within Norwalk City limits.*
  - \*Employment at Corp Discount employer*
- ☐ 1<sup>st</sup> month's payment as a check.
- ☐ No checks? Provide pre-printed proof of acct #.
  - \*Make your 1<sup>st</sup> month payment at your next visit.*

#### RENEWAL UP TO 2 MONTHS PAST EXPIRATION:

- ☐ No payment needed - IF no change in account.
  - \*If account has changed, provide info as above.*
- ☐ This form completed & signed - **BOTH SIDES**.
- ☐ Proof of discounts, if applicable.
  - \*Live or work within Norwalk City limits.*
  - \*Employment at Corporate Discount employer.*

#### RENEWAL UP TO 3 MONTHS PAST EXPIRATION:

*\*COMPLETE AS A NEW APPLICATION ABOVE.*

#### REQUIRED BANKING INFORMATION:

\_\_\_\_\_  
Financial Institution Name

\_\_\_\_\_  
Branch & Phone Number

\_\_\_\_\_  
Institution City, State

\_\_\_\_\_  
Routing Number

\_\_\_\_\_  
Banking Account Number

*\*Routing number can be found at the bottom far left-hand corner of the check. The next set of numbers is typically the account number.*

#### AUTHORIZATION:

I authorize the City of Norwalk Parks & Recreation Department to automatically deduct the monthly EFT fee for my annual membership from the account I have listed above.

I understand that:

- I am committing to an annual membership and I will fulfill all expected payments for the duration of the membership.
- If an EFT charge comes back as insufficient funds, I will be charged a \$25 NSF fee and the EFT will not be able to deduct the regular monthly charge from my account. All associated passes will be suspended until the NSF and monthly fee are paid in full.
- Any request for cancelation or suspension must be made using the appropriate form available at the Ernsthausen Recreation Center front desk at least 10 days prior to the 20<sup>th</sup> of the month. Refunds will not be granted. Passes must be held for a minimum of six months.

*I hereby acknowledge and understand that the City of Norwalk may share my information, including information provided in connection with any EFT program, with any other department of the City to be used by that department in the furtherance of its duties.*

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# ERNSTHAUSEN RECREATION CENTER

Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ M F  
First Last

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

2<sup>nd</sup> Adult Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ M F

Phone \_\_\_\_\_ Email \_\_\_\_\_

## CHILDREN (In your custody, high school senior & under or full time college student 24 & under)

Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ M F

Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ M F

Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ M F

Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ M F

Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ M F

Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ M F

Any falsification, misrepresentation, or fabrication of this application could result in the suspension of pass holder privileges. I have received a copy of the rules and regulations that govern the Ernsthausen Community Complex and hereby agree to abide by them, knowing that failure to do so may result in suspension or the pass(es) being revoked. **FEES ARE NOT REFUNDABLE!**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### ***Desk Staff Only***

☐ Corp Proof Seen (Corp Name \_\_\_\_\_)

☐ Tax/Res Proof Seen

☐ Unv

☐ 24 Hour Renewal Needed?

☐ Cover Sheet & Green Book Given

☐ Initial / Date \_\_\_\_\_

### ***Processing Only***

Pass Type \_\_\_\_\_

Month Pay Amt \_\_\_\_\_

1<sup>st</sup> Pay Date \_\_\_\_\_

Initial / Date \_\_\_\_\_