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| **24-25 Academic Quarterly membership** |

Auto-Payroll Deduction for Classified, Full-time Faculty, & Exempt Employees.

**Payroll Deduction Request**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Knights Auto-Payroll Membership**

Knights Annual Membership includes full access to the Student Recreation Center and the opportunity to participate in recreational activities, wellness classes, intramural sports, and outdoor activities. I authorize $75 or $125to be deducted from your paycheck. This contract will be effective immediately and ­­­will be cancelled automatically at the end of each quarter. A separate form will be needed per quarter.

[ ]  By checking this box I authorize $75 be deducted while enrolled in the Knights Annual Membership (Classified, Full-time Faculty, & Exempt Employees only).

[ ]  By checking this box I authorize $125 be deducted while enrolled in the Knights Annual Membership (Classified, Full-time Faculty, & Exempt Employees only).

*Cancelling your membership: If you wish to cancel your Knights Membership, contact the Student Rec Center Manager by email to fulfill this request. Your membership will be terminated at the end of the academic quarter from the date of the request. You must notify the student rec center two weeks in advanced to the cancellation date.*

**Knights Quarterly Membership (Steps)**

* Complete this form.
* If completing a family membership provide a list of names (First + Last) of the users in your immediate family (kids + spouse only).
* **Return this form to Aaron Vaughn, Adam Todd-Thomas or SRC front desk staff.** We will then get our information and send it over to payroll.
* Staff/Faculty will use your ID to scan into the SRC
* Family members names will be on our member list, and just need proof ID to use at check in.

This authorization is irrevocable once submitted. No refunds will be issued for any reason.

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Aaron Vaughn - Student Rec Manager - avaughn@wvc.edu - 509-682-6888

For official use only

Payroll deduction request date:\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax to Payroll: \_\_\_\_\_\_\_ Email to Payroll:\_\_\_\_\_\_\_