LRTA
LOUIS RIEL TEACHERS' ASSOCIATION

Electronic Funds Transfer Authorization

I hereby authorize The Louis Riel Teachers Association (LRTA) to directly deposit my payment in the bank account listed below. I have attached a void cheque or deposit information generated by my banking institution for the account specified below. This authorization is to remain in force until a written authorization from me of a termination or change has been received by LRTA.

Signature:_____

Date: _____

Complete the information below, attach a void cheque/banking deposit information and mail to (inter-school mail can be used c/o LRSD Board Office):

LRTA
101-919 St. Anne's Road
Winnipeg, MB R2N 4K8

Please note: email submissions cannot be accepted for security reasons.

Account holder name:	
Mailing Address:	
Telephone:	
Email address for payment remittance advice:	

Transit Number:	
Institution Number:	
Account Number:	

Attach void cheque here: