



Referee Physical Check Authorization Form

COMPLETE THIS FORM ONLY IF YOU WISH TO BE PAID BY PHYSICAL CHECK

I decline the option to be paid by Montana Youth Soccer Association (MYSA) through direct deposit and request to be paid by physical check. I understand this may result in a scheduled payment arriving later than if done by direct deposit due to check processing and mail time.

I understand that this authority will remain in effect through the conclusion of 2021 or until I cancel it in writing.

Name (Please Print)

Address

Phone Number

Apartment/Unit #

Email Address

City, State, Zip

Signature

Date

Materials may be submitted to MYSA only by **MAIL**. Submissions made by email will be deleted immediately and will not be processed.

Please mail to the address below. Submissions must include a completed W-9 Form.

Montana Youth Soccer
ATTN: Fall Referee
P.O. Box 3466
Butte, MT 59702

Questions can be referred to SYRA Justin Harcrow – justin@montanayouthsoccer.com.