



## Direct Deposit Authorization Purse Payments

### Personal Information

Name   
Address   
Phone  Email

### Account Information

Check One ☐ NEW ☐ CHANGE ☐ CANCEL

Bank Name

Account #  ☐ Checking

Routing #  ☐ Savings

### Authorization Agreement

I hereby authorize Monticello Raceway Management to initiate automatic deposits to my account at the financial institution listed above.

Further, I agree not to hold Monticello Raceway responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution, or failure to notify Monticello Raceway of any changes, including bank changes, or due to an error on the part of my financial institution in depositing funds into my account.

This authorization will remain in effect until Monticello Raceway receives written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form.

A separate Direct Deposit Authorization Agreement must be completed for every partnership.

A voided check (for deposit to a checking account), a savings account deposit slip (for deposit to a savings account) or letter from your banking institution are required with all new or change requests.

### Signatures

Authorized Signature (Primary):	<input type="text"/>	Date:	<input type="text"/>
Authorized Signature (Joint):	<input type="text"/>	Date:	<input type="text"/>
Authorized Signature (Joint):	<input type="text"/>	Date:	<input type="text"/>
Authorized Signature (Joint):	<input type="text"/>	Date:	<input type="text"/>

**Please attach a voided check, deposit slip or bank letter and return this form to Accounts Payable :**

ATTN: Accounts Payable  
888 Resorts World Drive  
Monticello, NY 12701

# Purse Authorization

Note: Before your check can be released, you must complete and sign the following form along with IRS Form W-9 or Form W-8ECI (if non-U.S. resident). Failure to provide a valid U.S. tax ID number may result in an IRS penalty.

**MONTICELLO**  
RACEWAY

ATTN: Accounts Payable  
888 Resorts World Drive  
Monticello, NY 12701  
P: 845-428-7200 x1502 F: 845-428-7299

\_\_\_\_\_  
USTA #                      First Name & Middle Initial                      Last Name or Company Name

\_\_\_\_\_  
Stable USTA #                      Stable Name (if used)

\_\_\_\_\_  
Street Address                      City                      State                      Zip Code + 4

**U.S. Social Security Number:**

				-			-						
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or

**U.S. Employer ID Number:**

		-											
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**Payment option:**

- ☐ Direct Deposit
- Must complete separate Direct Deposit Authorization Form
- ☐ Mail checks to the above address
- ☐ Checks will be picked up by myself or:  
(If other than owner, this form must be notarized)

**Contact Information:**

\_\_\_\_\_  
Main phone number

\_\_\_\_\_  
Alternate phone number

\_\_\_\_\_  
E-mail address

Check all that apply:

☐ Owner

☐ Trainer

☐ Driver

Additional owners:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date