



**CREDIT  
UNION**

COMMUNITY

CREDIT TO CUSTOMER: Southern Shore Minor Hockey

CUSTOMER ACCOUNT #: 07984-109

MONTHLY AMOUNT: \_\_\_\_\_

DATE: \_\_\_\_\_

**PLEASE COMPLETE AND ATTACH VOID CHEQUE:**

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

If a void cheque is not available please have your financial institution complete the following section:

BANK NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TRANSIT #: \_\_\_\_\_

INSTITUTION #: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_

FINANCIAL AUTHORIZED SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

BANK STAMP