Fax to (904) 273-3463 Attn: Leslie Manna or Scan and Email to LeslieManna@PGATOURHQ.com



Or Mail to PGA TOUR Attn: Leslie Manna 1 PGA TOUR Boulevard Ponte Vedra Beach, FL 32082

PGA TOUR/Champions Tour Caddies Direct Deposit Form

Name	Social Security Number (or Tax ID #)	
TNAITIC	Social Security Number (of Tax ID #)	
Mailing Address	Email Address	
0. 7.	DI DI I	
City State Zip	Phone Number	
Your Financial Institution		hecking Account
	□ Sa	avings Account
T' 11 A 11	D .: N. 1 (ACH)	
Financial Institution Address	Routing Number (ACH)	
	Account Number	
IMPORTANT! Please attach a voided check with this form (not a deposit slip). A deposit slip is only		
acceptable for a savings account.		
I hereby authorize PGA TOUR, Inc. to initiate credit entries and, if necessary, debit entries (adjustments for any		
erroneous credit entries only) to my account with the Financial Institution listed above. This authority is to		
remain in full force and effect until PGA TOUR, Inc. has received my written notification of its termination. I		
understand that PGA TOUR, Inc. and the above named Financial Institution must have a reasonable		
opportunity to act upon such termination notice.		
Participant		Date
Signature X		