

# IMPORTANT!

If these forms are not filled out **100% correctly**, they will be sent back for correction and your banking information will not be entered into your system.

Please read the *easyMerchant* service agreement:

<http://www.leagueathletics.com/easymerchantagreement.pdf>

## Most Common Errors:

1. The Account Name on the check or bank letter must match the Account Name on the Electronic Payment Authorization **100%**, letter for letter.
2. The Account Name on the check must match Line 2 of the W-9, **100%**, letter for letter.
3. Line 1 of the W-9 must be the business name on file with the IRS, letter for letter.

## SENDING OPTIONS

- (Fast) Scan/Take a Picture on your Phone and email to [banking@siplay.com](mailto:banking@siplay.com)
- (Slow) Mail to:

**Attn:** Billing Dept.  
Sports Illustrated Play  
18 Division Street Suite 414  
Saratoga Springs, NY 12866

- I. I do hereby authorize **SI Play LLC**, hereinafter named the COMPANY, to debit or credit entries to my (Checking Account/Savings Account) for applicable online registration and/or merchandise transaction fees as indicated and named below as the depository financial institution, hereafter named FINANCIAL INSTITUTION. I acknowledge that the origination of ACH (Automated Clearing House) transactions to my account must comply with the provisions of U.S. law. Furthermore, if any such debit(s) should be returned NSF (not sufficient funds), I authorize the COMPANY to collect such debit(s) by electronic debit and subsequently collect a returned debit NSF fee of \$25.00 per item by electronic debit from my account identified below.
  
- II. This authorization is to remain in full force and effect until the COMPANY has received written notification from me (or other authorized person) of its termination in such time and in such manner as to afford the COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.
  
- III. I have read, understand and agree to the terms and conditions of the service agreement found at <http://www.leagueathletics.com/easymerchantagreement.pdf>

I, \_\_\_\_\_ am a duly authorized check signer on the Financial  
(Printed name of Account Signatory)\*

Institution Account listed below. I authorize all of the above as evidenced by my signature below:

Signature\*: \_\_\_\_\_ Date\*: \_\_\_\_\_

**LeagueAthletics.com Account ID\***

(Can be found in Configuration > General Settings) \_\_\_\_\_

**Account Name\***

**(Must Match Check/Letter and Line 2 of W-9 100%)** \_\_\_\_\_

**Type of Account\***

Checking

Savings

**ATTACH VOIDED CHECK HERE\***

**OR**

**Provide letter from Financial Institution with the following information:**

On Bank Letterhead

Account Name

Account number

Routing number

Signature from a Bank Officer/Branch Management