



**Middle Georgia** State University

## Recreation & Wellness Center - Macon Campus Payroll Deduction Authorization Form

I, \_\_\_\_\_, authorize Middle Georgia State University to deduct \$20 per month from my paycheck, beginning in the month of \_\_\_\_\_, \_\_\_\_\_. *(Please note that employees paid bi-weekly will have their monthly amount divided into two deductions per month.)*

I agree and understand that this deduction will run indefinitely until I cancel by written notification to the Payroll Office seven days prior to the applicable pay date.

**Employee Signature** \_\_\_\_\_

**Faculty/Staff ID #** \_\_\_\_\_

(This can be found at <http://www.mga.edu/technology/banner.aspx>. Click on "Banner ID Lookup" under Important Links on right side of screen.)

**Date** \_\_\_\_\_

**\*\*Recreation and Wellness Center fee deduction is an *after tax* deduction.\*\***

**Please return completed form to:  
Payroll Office  
Attn: Amanda Register  
Administration Office; Room #141**