



Girl Scouts Heart of the Hudson
ACH AUTHORIZATION FORM FOR TROOP BANK ACCOUNTS

Bank Account Information

Service Unit # _____ Troop # _____ Account Type Checking Savings

Bank Name: _____

Bank Routing # _____ Bank Account # _____

Account Mailing Address: _____

E-mail Address for Communications: _____

By signing below, I acknowledge that Girl Scouts Heart of the Hudson (GSHH) has the right to initiate bank credits/debits to the troop/SU bank account indicated below and this account and its funds are to be used for Girl Scouts activities only. Further, I authorize the financial institution indicated below to accept credit/debit entries by GSHH. In the event GSHH erroneously deposits funds into my account, I authorize GSHH to debit my account for an amount not to exceed the original amount of the erroneous credit.

I understand that it is the troop/SU's responsibility to notify GSHH if any of the information contained herein changes and to immediately submit a new ACH Authorization Form with the new bank account information.

Primary Account Signer

Authorized Signature _____ Date _____

Submit your completed form to: membercare@girlscoutshh.org. Your ACH form must be legible or they will not be processed.

You may also mail your ACH form to:

Girl Scouts Heart of Hudson
Attn: Member Care
30 Scott's Corners Drive
Montgomery, NY 12549