



ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION FORM

Canadian Dollars to Canadian Bank Account

This form is used to authorize Connect Music Licensing to deposit payments to your bank account.

Member Information:

Member Name: _____

Address: _____

Contact Name: _____

Title: _____

Phone: _____

Fax: _____

E-mail address: _____

Bank Information:

Bank Name: _____

Bank # (3 digits) _____

Transit # (5 digits) _____

Bank Account Number: _____

Name of Bank Account: _____

Authorized by: _____

Required Documents:

- VOID cheque (original or scanned)
- EFT Authorization Form

Send To:

Connect Music Licensing or e-mail membership@connectmusic.ca
85 Mowat Avenue
Toronto, ON M6K 3E3

Signature: _____
Name Title

Date: _____

(I have the authority to sign this document and provide this information on behalf of the corporation)

* Note: Payment information will be sent to the email address provided.