

ACH Enrollment Form
Electronic Funds Transfer (EFT)
(All fields must be completed)

North Atlantic

Community Name:	
Contact Name:	
Email Address:	
Contact Phone #:	
Bank Address: <small>(Street Name, City, State, and Zip Code)</small>	
Name on Account:	
Bank Name:	
CHECKING Bank Routing Number (9 Digits)	
CHECKING Bank Account Number (Include leading zeros):	
Attach a CHECK marked "VOID" with preprinted name & current address or an official BANK FORM , certified & stamped by a banking official, which provides routing and bank account number.	
PLEASE NOTE: USAGSO will transmit your payment electronically based on the information you have provided. If the transmission fails because you have given us incorrect or outdated information, USAGSO can only provide a replacement payment AFTER USAGSO has received a refund from the financial institution. It is important that you provide correct account & bank routing numbers - and that you notify USAGSO IMMEDIATELY if you change banks or account numbers. USAGSO has the right to retract and correct payments as necessary after prior notification.	
Signature:	
Printed Name:	Date:
Title:	Phone:

Please mail or email your completed form to Silvia Piva at:

USA Girl Scouts Overseas-North Atlantic

CMR 427 Box 120

APO AE 09630

spiva@girlscouts.org