

RECREATIONAL FACILITY

SALARY DEDUCTION FORM

Spring _____ Summer _____ Fall _____

Faculty/Staff - \$30 per semester
Dependents - \$30 each, per semester
Locker Rentals -\$5 per semester

I agree to have my recreational fees deducted from my salary.

Employee _____ **Banner ID #** _____

Department _____ Phone Ext _____ \$ _____

Dependent (Spouse) \$ _____

Dependent (Child) \$ _____

Dependent (Child) \$ _____

Dependent (Child) \$ _____

Dependent (Child) \$ _____

Total \$ _____

Men's Locker \$ _____

Women's Locker \$ _____

Total \$ _____

Recreational Complex Staff / Date

Please Return To:
Linda Stanley, Recreational Complex
Box 91620 MSU
(Fax: 5373; Ph: 5371)