



Sign Up for Direct Deposit

Please complete this form and submit it to your employer's payroll department or give it to a Member Service Representative and we'll mail it for you.

Your Name:	Date:
Soc.Sec. Number:	
Name of Employer:	
Employer's Address (if you would like us to mail the form for you):	
I hereby authorize enrollment in direct deposit effective (date) _____	
Deposit: <input type="checkbox"/> Total Net Pay or <input type="checkbox"/> Amount of \$_____	
To: Tidemark Federal Credit Union PO Box 1800 1941 Bridgeville Highway Seaford, DE 19973 302-629-0100	
Routing #: 231176884	
My Credit Union 9-Digit Account #: _____	
_____ Signature	_____ Date

Please note that your employer may have special requirements to sign up for or change your Direct Deposit. Also, some employer's will not split your pay between more than one recipient. In this case, you must deposit your total net pay. Please contact your Payroll Department for additional guidance.