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## Trinity Bible Church Seeking God's Direction Intake Form

Date:	
I want to support the Trinity Bible Church S with my Pledge of \$	
To be paid by:	
A. Please debit my bank account: (attac	h VOID cheque)
\$ (sp	ecify amount)
One Time on	or
Monthly on the 5 <sup>th</sup>	
The debit will be processed to your account on the $5^{th}$ day of each month or the next b $5^{th}$ of the month following the date of this Agreement.	ousiness day. Note: Your first payment will be processed on the
B. Cheque enclosed for \$	
C. Cash payment of \$	
D. Online payment of \$	
Please indicate if online payment is a	i.
One- Time payment	
Monthly Withdrawal	
Donor's Signature	
Donor's Name:	- <u></u>
(including middle initial)	
Address:	
Email:	

Complete Name and Address required for Tax Reporting.

I may revoke my authorization at any time, subject to providing notice of 30 days. To obtain a sample cancellation form, or for more information on my right to cancel a PAD Agreement, I may contact my financial institution or visit <a href="www.cdnpay.ca">www.cdnpay.ca</a>. I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursements for any debit that is not authorized, or is not consistent with this PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit <a href="www.cdnpay.ca">www.cdnpay.ca</a>