

# Bethel Church

"Responding to the Heart of God; Transforming the  
Heart of the City, the Nation and the World"

## PRE-AUTHORIZED DEBIT AGREEMENT

I wish to support Bethel Church through a pre-authorized donation.

I **hereby authorize** you to debit my bank account (please attach a VOID cheque) for the amount stated below on (circle one or both):

the 1<sup>st</sup> of the month    OR    the 16<sup>th</sup> of the month

**(NOTE: If you would like to have amounts withdrawn on both dates, you must complete a separate form for each date.)**

**(PLEASE READ CAREFULLY) I understand and accept the following:**

- my bank account will be debited on the stated dates, or on the next business day, until such time as the authorization is revoked or modified
- I may revoke or modify my authorization at any time, by providing written notice to Bethel Church at the address above, or by electronic means, **no less than 30 days prior to the date of withdrawal**, using the form available from the office or the website
- I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this P.A.D. Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).
- Should a payment be returned to Bethel as NSF, I will be debited the amount of the NSF charge. Bethel also reserves the right to summarily cancel any Pre-Authorized Debit agreement following 3 occurrences of an NSF payment.

*(see back for authorization information)*

# Bethel Church

"Responding to the Heart of God; Transforming the Heart of the City, the Nation and the World"

**I HEREBY AUTHORIZE THE FOLLOWING DEBIT TO MY BANK ACCOUNT:**

Total Donation Amount: \_\_\_\_\_ of which to General: \_\_\_\_\_ To Build: \_\_\_\_\_

Donor Name (s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Offering Envelope # (if you are setup with a number currently): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Any questions? Contac Keri Oosterhof at 613-542-2990 or [keri@bethelkingston.com](mailto:keri@bethelkingston.com)*

FOR OFFICE USE ONLY

CUSTOMER NUMBER: \_\_\_\_\_

CUSTOMER ENVELOPE NUMBER: \_\_\_\_\_

DATE SETUP: \_\_\_\_\_