

## Pre-authorized Debit Agreement

### First Baptist Church

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

1309 Bernard Ave.

Kelowna, BC

250 861-5425

Email: info@fbckelowna.com

Please Debit my bank account in the amount of:

\$50 \_\_\_\_\_ \$100 \_\_\_\_\_ \$200 \_\_\_\_\_ Other \$ \_\_\_\_\_

Please debit the above amount on the:

15<sup>th</sup> of every month \_\_\_\_\_

30<sup>th</sup> of every month \_\_\_\_\_

15<sup>th</sup> & 30<sup>th</sup> of every month \_\_\_\_\_

Name: \_\_\_\_\_

Address/Contact information \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This donation is made on behalf of: \_\_\_\_\_an Individual \_\_\_\_\_a business

I may revoke my authorization at anytime, providing notice of 30 days before the last withdrawal. To obtain more information on my right to cancel a PAD Agreement, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca)

I have the right to receive reimbursement 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 [www.cdnpay.ca](http://www.cdnpay.ca)

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