



Pre-authorized Debit Agreement

I wish to support Cornerstone Neighbourhood Fellowship Baptist Church through automatic giving donations. Cornerstone Neighbourhood Church processes automatic giving donations on 1st and 15th of each month.

Date _____ New Adjustment

Name _____

Address _____

Phone _____

Email _____

Please designate your gift: \$ _____ General Fund

\$ _____ Facilities Fund

\$ _____ Total Donation

Please delete or check as appropriate:

I/We authorize Cornerstone Neighbourhood Fellowship Baptist Church to process a debit in the amount of \$ _____ on my/our account on the 1ST or 15TH day of each month beginning ____/____ (mm/yy).

Donor Signature _____

This donation is made on behalf of: Individual Business

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 Pre-authorized Debit Agreement, I may contact my financial institution or visit www.cdnpay.ca. 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 PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca.2

Please return the completed form to the **CNC Treasurer, Darlene Unrau** in person or at unraudarlene@gmail.com