

Agreement Terms

For recurring contributions

I/We authorize Calvary Baptist Church and the financial institution designated (or any other financial institution I/we may authorize at any time) to begin deductions as per my/our instructions for regular recurring payments towards the work and ministries of Calvary Baptist Church.

Regular monthly payments for the amount described below will be debited to my/our specified account on the designated day of each month. Calvary Baptist Church will provide 10 days written notice of the amount of each regular debit. Calvary Baptist Church will obtain my/our authorization for any other one-time or sporadic debits.

The authority is to remain in effect until Calvary Baptist Church has received written notification from me/us of its change or termination. This notification must be received at least 10 business days before the next debit is scheduled at the address provided below. I/We may obtain a sample cancellation form, or more information on my/our right to cancel a PAD Agreement at my/our financial institution or by visiting www.cdnpay.ca

Calvary Baptist Church may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least 10 days prior written notice to me/us.

I/We have certain recourse rights if any debit does not comply with this agreement. For example, I /we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.cdnpay.ca

I/We acknowledge that, in the event there are insufficient funds in our account at the time of the PAD, I/we will be responsible for paying a fee that is determined by the financial institution responsible for my account.

I/We also acknowledge that at the end of each tax year, a receipt for the total contributions over the year will be mailed to the address provided below. I/We am responsible for updating the administrator at Calvary Baptist Church of any changes in address in order to ensure the timely delivery of a tax receipt.

If I/we would like to designate funds for a particular event or ministry outside the designations described in this document, I/we will provide written notice to the church treasurer at least one day before the payment is made.

Account Information

Name(s): _____

Nature of Contribution: Personal Business

Address: _____ City/Town: _____

Province: _____ Postal Code: _____

Phone Number: _____ Email: _____

Financial Information

Institution Name: _____

Transit Number (5 digits): _____ Branch Number (3 digits): _____

Account Number: _____

Address: _____ City/Town: _____

Province: _____ Postal Code: _____

Payment Information

A payment of \$_____ will be withdrawn from the account listed above on the last business day of each month. The monthly payment will reflect the following designations:

\$_____ - Calvary Baptist General Fund \$_____ - _____

\$_____ - _____ \$_____ - _____

\$_____ - _____ \$_____ - _____

Authorized Signature(s): _____