Pre-Authorized Debit

This service allows North Shore Unitarian Congregants to meet their pledges amounts by authorizing direct debit payments from their Bank Accounts.



Please complete this Application, sign it, and return it to our church office with a voided cheque or deposit slip attached.

DEBIT DETAILS: Start Date (MM/YYYY)	End Date (MM/YYYY)	
Start Bate (Willy FFFF)	Life Date (Wilvi) 111	' /
Monthly Amount:	On which day of the month?	
\$	□- 1 st day	□-15 th day
CONCRECANTIC INFO.		
CONGREGANT'S INFO:	1	
First Name	Last Name	
Mailing Address		
City	Province	Postal Code
Home Phone:	Cell Phone	
Email Address:		
FINANCIAL INSTITUTION INFO:		
Financial Institution Name		
Financial Institution Address		
Transit/Branch Number	Financial Institution/Bank Number	
Account Number		

(continued on next page)



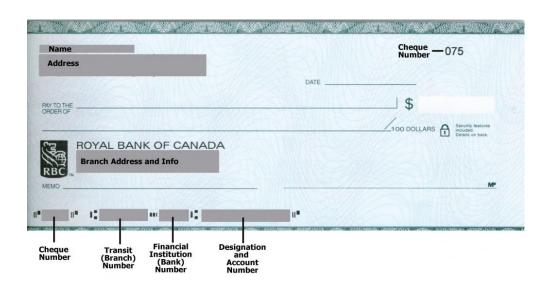
North Shore Unitarians

370 Mathers Ave
West Vancouver, BC V7S 1H3
604-926-1621
www.northshoreunitarians.ca
Email: info@northshoreunitarians.ca

BELONG WITH HEART. THRIVE IN SPIRIT. ACT IN SERVICE

VOIDED CHEQUE OR DEPOSIT SLIP:

Please attach a voided cheque or deposit slip.



AUTHORIZATION:

I (we) as the account holder(s) authorize the North Shore Unitarian Church and my (our) financial institution to debit, in accordance with the Rules of the Canadian Payments Association, my (our) account at the branch specified above for the purpose of adding funds to my (our) Church Pledge account. The information set out above may be sent to the North Shore Unitarian Church's bank to implement this authorization. This authorization is to remain in effect until the North Shore Unitarian Church has received written notification from me (us) of its change or termination. Written notification must be received at least 30 days before the next debit is scheduled at the church's address (shown in the letterhead above).

My (our) account will be debited on my (our) pre-established monthly billing date for the amount selected as per the Debit Details stated above.

I (we) represent and warrant that: (1) The banking and account information provided above is complete and accurate and I (we) will promptly notify the North Shore Unitarian Church of any change in such information; and (2) All persons required to authorize withdrawals from the account specified above have authorized the debits to be drawn from the specified account pursuant to this authorization.

Signature:	Date:	
Signature:	Date:	