

PRE-AUTHORIZED DEBIT (PAD) AGREEMENT

Bromley Road Baptist Church 1900 Lauder Drive, Ottawa, ON K2A 1B1 Date: _____

I would like to support the work of Bromley Road Baptist Church through regular donations commencing ______ (indicate month and year).

□ Please debit my bank account on the □ 15th of the month with \$_____

 \Box Please debit my bank account on the \Box 28th of the month with \$_____

Please select either or both schedules. Please Note: If two deductions are selected, they must be of equal amounts

Signature:	
Donor Name:	
Address:	
Phone Number:	
Email Address:	

Please attach a void cheque to this form.

I may revoke my authorization at any time, subject to providing at least 30 days notice. To obtain a sample cancellation form, or for more information on my right to cancel a PAD agreement, I may contact my financial institution or visit <u>www.cdnpay.ca</u>.

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 <u>www.cdnpay.ca</u>.

Please return your completed form in a sealed envelope to the Treasurer and retain a copy for your records. Thank you for your support of Bromley Road Baptist Church.