



Pre-Authorized Giving Form (PAG)

also known as "Pre-Authorized Remittance (PAR)"

I/We, _____ (envelope# _____), request and authorize The United Church of Canada to debit my/our account on the 20th of every month in the amount of \$ _____, starting the 20th of _____ (enter month). This contribution is

made on behalf of: Bethany United Church
75 Geddes Street
Elora, ON N0B 1S0

This contribution by me/us to Elora United Church is to benefit:

Bethany United Church General Fund \$ _____

United Church Mission & Service Fund \$ _____

Please attach a **VOID cheque** if This is a **new** Pre-Authorized Giving enrollment, or Your banking information has changed.

- I may change the amount of my contribution at any time subject to providing notice of 15 days.
- I may revoke my authorization at any time, subject to providing notice of 15 days at which time I will submit a cancellation form obtained from the Church PAG contact or by contacting my financial institution or visiting 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 PAG agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca.
- **I waive my right to receive pre-notification of the amount of the Pre-Authorized Giving (PAG) and agree that I do not require advance notice of the amount of PAG before the debit is processed.**

Signed: _____ Date: _____

The use, retention and disclosure of personal information collected from this form is done in compliance with privacy legislation, including but not limited to, the Personal Information Protection and Electronic Documents Act (2000, c.5).