## **OUR LADY OF GUADALUPE**

## PRE-AUTHORIZED GIVING FORM

Thank you for your commitment to support the mission of Jesus Christ through Pre-authorized Giving at Our Lady of Guadalupe Parish.

(NOTE: 30 DAYS' NOTICE REQUIRED FOR CHANGES.)

Ple	ase	ch	oose	one:
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<b>New</b> Pre-authorized Giving set up o	r; <b>Make a change</b> to existing Pre-authorized Giving.
IMPORTANT: Your Envelope/Giving #: _	
I,to automatically withdraw from my bank	(insert full name), hereby authorize Our Lady of Guadalupe Parish account as follows:
The amount of \$ is to be	e taken <b>(please choose <u>only one</u>)</b> :
monthly (12 payments) or;	
bi-weekly (26 payments) or;	
weekly (52 payments) starting on Note: Start date cannot be in the cu	the day of the month of, in the year, 20 rrent month.
	E ATTACH A SAMPLE CHEQUE MARKED "VOID" and email it to finance@ourladyofguadalupe.ca.
My mailing address and telephone no	umber, and email address <u>if different</u> from on my sample cheque.
Address:	Phone:
	Email:
Guadalupe Parish and are drawn on of Lady of Guadalupe Parish. Any deliver  2. Your treatment of each debit shall be indicated and to charge the amount sp.  3. I acknowledge that a Pre-authorized Government of transaction was not drawn in accordance and declaration to my financial inst.  4. I may revoke my authorization at any Lady of Guadalupe Parish office. I un information on my right to cancel this prisit: www.cdnpay.ca.	me as an individual donor. All amounts are payable to Our Lady or directed to you by my current financial institution on behalf of Our y of this authorization to you constitutes delivery by the undersigned. The same as if the undersigned has personally directed you to pay as pecified above to the account of the undersigned. This is invited and the pre-authorized Giving dance with my authorization and that I have 90 calendar days to distution in order to make a claim for an incorrect transaction. The time, subject to providing notice within 30 calendar days to the Our derstand I may also obtain a sample cancellation form or for more pre-authorized debit agreement, I may contact my financial institution of the Parish, 10 Maple St, Dartmouth, NS B2Y 2X3 phone 902-466-6183.
Date:	X