

PAR Authorization Form

The Presbyterian Church in Canada

Contributer's Name (Please Print) _____

Envelope #: _____

I hereby request and authorize The United Church of Canada on behalf of:

Central Presbyterian Church

(name of congregation)

165 Charlton Ave. W., Hamilton, ON L8P 2C8

(address of congregation)

to debit my account on the 20th day of each month in the amount of \$ _____, starting on the 20th of *(enter month/year)* _____ as a contribution by me/us to the above local church.

Distribution is to be as follows:

Central's Ministry & Mission \$ _____ Other:\$ _____ (please specify)

Bank/Institution No: _____ Transit/Branch No: _____ Account No: _____

Please attach a VOID cheque.

This donation is made on behalf of: ___ individual(s) ___ business (please tick correct category)

Signature: _____

Date: _____

- 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 PAR 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 PAD (Pre-authorized Debit) 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 PAD and agree that I do not require advance notice of the amount of PADs before the debit is processed.

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)

For office use only

Name of Church PAR Contact:

Phone# 905-522-9098 Ext. 27

PCC PAR Number: 6060665