

Pre-authorized Remittance (PAR) Agreement Form

First Baptist Church Regina

Contributor's Name (Please	Print) Envelope #:
I hereby request and autho	orize
•	First Baptist Church Regina Inc.
	2241 Victoria Ave
	Regina SK
to debit my account:	
1. monthly on the 3 rd	day of each month in the amount of \$, starting on the 3 rd of
(enter month/year)	
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on the 3 rd of (enter r	he 3 rd and 17 th day of each month in the amount of \$, starting month/year), starting month fall on the weekend or holiday will be processed on the next business day)
Distribution is to be as follows:	ows:
General Offering: \$	
Please attach a VOID cl	Date:
I may revoke my authorization at obtained from my church's PAR C	contribution at any time subject to providing notice of 30 days. any time, subject to providing notice of 30 days at which time I will submit a cancellation form Contact, by contacting my financial institution or by visiting www.cdnpay.ca
reimbursement for any debit that information on my recourse right I waive my right to receive pre-no	ny debit does not comply with this agreement. For example, I have the right to receive t is not authorized or is not consistent with this pre-authorized remittance agreement. To obtain most, I may contact my financial institution or visit www.cdnpay.ca patification of the amount of the pre-authorized remittance and agree that I do not require advance
The use, retention and disclosure	orized remittance before the debit is processed. of personal information collected from this form is done in compliance with privacy legislation, Personal Information Protection and Electronic Documents Act (S.C. 2000, c. 5)
For office use only	
Authorized:	Date entered: