



Peterborough Campus Ministry

820 Frank Street, Peterborough, ON K9J 4N4

PRE-AUTHORIZED PAYMENT PLAN

Questions? Call the office at (705) 874-1871 or e-mail: development@ptbocampusministry.ca

I want to support **Peterborough Campus Ministry**, through pre-authorized payments.

(Please print)

I/we _____ hereby authorize the Diocese of Peterborough to withdraw the amounts specified below beginning *(insert date)* _____ from my/our account and deposit said funds to the general account of Peterborough Campus Ministry, **a voided cheque is enclosed**.

MONTHLY

Contributions can be withdrawn from your account once or twice per month according to your instructions here:

- Please debit my account on the 15th monthly: \$ _____
- Please debit my account on the 30th monthly: \$ _____

ANNUALLY

Alternatively – annual contributions for Campus Ministry will be withdrawn from your account on the 15th of the month, specified below:

- Please debit my account on the 15th of the month of _____ each respective year, for the following annual contributions:
- 2022 \$ _____ 2023 \$ _____ 2024 \$ _____

I/ we understand changes and/or cancellation must be made in writing.

(Account Holder Signature)

(Date)

(Joint account co-signature)

(Campus Ministry Chaplain Signature)

(Date)

Your information

Name(s) on Bank Account _____

Office use only

Home phone _____ Other phone _____

Control # _____

Home address _____
Address town postal code

Bank Name _____

Bank Address _____
address town postal code

Branch # _____ Institution # _____

Bank account # _____

PLEASE ATTACH A VOID CHEQUE

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 www.cdnpay.ca.

I may revoke my authorization at any time, subject to providing notice of 30 days. 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 www.cdnpay.ca.