**Christ Church Toronto**Macintosh HD:Users:Kyle:Documents:Christ Church Toronto:Opperations:Branding:CCT Branding:CCT Logo Final:ChristChurch_logo_crimson_outlined.eps

**Pre-Authorized Debit (PAD) Agreement**

I/We authorize Christ Church Toronto to debit my bank account for giving towards Christ Church Toronto’s General Fund:

Donation amount:

Frequency (Indicate your choice):  Semi-Monthly  Monthly Other

On the 1st , 15th , 20th , or 28th (Indicate your choice) day of each and every consecutive month.

Start date:       End date:

Donor Name:

Address:

Email:       Phone:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

These services are for (check one): personal use  business use.

**Bank Account Information**

Bank Transit # Route Account Number

                                                                                                                       

Financial Institution Name:

Branch Address:

Please attach a void cheque to this application and email or mail to:

Christ Church Toronto

2017 Danforth Ave., Unit 301, Toronto, ON, M5B2C7

Telephone: (416) 880-0506

Email: giving@christchurchtoronto.ca

This authority is to remain in effect until Christ Church Toronto has received written notification from me of its change or termination. This notification must be received at least 30 days in advance of the next pre-authorized debit at the address above. 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

I/We 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 Pre-Authorized Debit Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).