

**Bonavista Baptist Church**  
**Automated Offerings Option - Enrollment Form**  
**Pre-Authorized Debit (PAD) Agreement**

Date to begin: \_\_\_\_\_

Frequency of automated offerings (*please check box*)

- Once a Month     1<sup>st</sup> **OR**     16<sup>th</sup>  
 Weekly (Note: weekly offerings will be withdrawn each Monday)  
 One time donation

This donation is made on behalf of:     an Individual             a Business

Personal Information:

Name: \_\_\_\_\_ Envelope No. \_\_\_\_\_ (*Optional, if known*)

Address: \_\_\_\_\_  
\_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone No. \_\_\_\_\_

Please apply funds as follows:

General Fund	\$ _____
Building Fund	\$ _____
Benevolent Fund	\$ _____
Missions	\$ _____
Other _____	\$ _____
Total Donation per Withdrawal	\$ _____

*Gifts to approved BBC programs/projects will be used as designated. When the need has been met, funds will be redirected to similar projects/programs or where most needed, upon approval of the Elders.*

I choose to donate to Bonavista Baptist Church by Pre-Authorized bank withdrawals.  
I authorize Bonavista Baptist Church to automatically withdraw donations from my bank account.  
**A VOID cheque is attached to provide banking information.**

I may revoke my authorization at any time, subject to providing notice of two weeks. To cancel or adjust the PAD payment, email the church office at [Main.Office@bonavistabaptist.com](mailto:Main.Office@bonavistabaptist.com) with "Attention: Donation Steward – change to automated offering" in the subject line or phone the church office at 403-271-6969.

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](http://www.cdnpay.ca).

Print Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_