

Monthly Giving Contribution Form Please complete, detach and forward to SPRINGVALE with void cheque.

Name _____ Address _____

City _____ Province _____ Postal Code _____

Telephone Number (_____) _____ Email Address _____

Bank Name _____ Transit # _____ Bank # _____ Account # _____

(Please attach a "VOID" cheque to ensure accurate processing)

I authorize Springvale Baptist Church to Debit my bank account (as per attached "VOID" cheque) in the amount of \$ _____ on the 1st and/or 15th day of each month or weekly.

I will promptly notify Springvale if there is any change to my current mailing address or banking information. This agreement may be cancelled at any time upon Springvale receiving notice not less than 5 business days before the transaction processing date. Springvale will never transfer the right to debit your bank account to any other party. I am the person required to sign on the account indicated.

Signature required: Signature _____ Date _____

Springvale Pre-Authorized Donation – Terms and Conditions

I acknowledge that this Authorization is provided for the benefit of Springvale Baptist Church ("Springvale") and the Processing Institution and is provided in consideration of the Processing Institution agreeing to process debits against my account in accordance with the Rules of the Canadian Payments Association.

I warrant and guarantee that all persons whose signatures are required to sign on this account have signed the attached authorization.

I hereby authorize Springvale to draw on my account number, with the Processing Institution, as detailed on the attached voided specimen cheque, for the purposes of donation to Springvale, a Registered Canadian Charity.

The authorization may be cancelled at any time upon notice by me. I acknowledge that, in order to revoke this authorization, I must provide notice of revocation to Springvale.

I acknowledge that provision and delivery of this authorization to Springvale constitutes delivery by me to the Processing Institution. Any delivery of this authorization to the Processing Institution constitutes delivery by me.

I undertake to inform Springvale, in writing, of any change in the account information provided in this authorization prior to the next due date of the pre-authorized donation.

The account that Springvale is authorized to draw upon is indicated in the accompanying authorization. A specimen cheque for this account has been marked "VOID" and is attached hereto.

I acknowledge that the Processing Institution is not required to verify that a pre-authorized donation has been issued in accordance with the particulars of my Authorization including, but not limited to, the amount.

I acknowledge that the Processing Institution is not required to verify that any purpose of payment for which the pre-authorized donation was issued has been fulfilled by Springvale as a condition to honouring a pre-authorized donation issued or caused to be issued by Springvale on my account.

A pre-authorized donation may be disputed by me under the following conditions:

- 1) the pre-authorized donation was not drawn in accordance with my Authorization; or
- 2) the Authorization was revoked.

I, in order to be reimbursed, acknowledge that a declaration to the effect that either (1) or (2) took place, must be completed and presented to the branch of the Processing Institution holding my account up to and including 90 calendar days in the case of a personal household pre-authorized donation (or up to and including 10 business days in the case of a business pre-authorized donation), after the date on which the pre-authorized donation in dispute was posted to my account.

I acknowledge that a claim on the basis that the my Authorization was revoked, or any other reason, is a matter to be resolved solely between Springvale and me when disputing any pre-authorized donation after (90 calendar days in the case of a personal/household pre-authorized donation or 10 business days in the case of a business pre-authorized donation).

Any personal information collected will be used solely for the purpose of processing this pre-authorized donation and will only be disclosed to the Processing Institution and those within Springvale responsible for administration of this pre-authorized donation.

(over)

Monthly Giving Plan



Springvale is pleased to offer an easy method to those who wish to contribute financially to the ongoing local and global ministry of Springvale Baptist Church.

With your permission, we will be pleased to process your contribution automatically through your bank on the 1st and/or 15th of each month or weekly, whichever you prefer. Please complete all sections of the form on the reverse side, put in a sealed envelope and place it in the offering plate or return it to the Springvale office, Attention: Joyce Johnson. You will receive an annual receipt for your contributions.

If you have any questions, please contact Dan McNalley or Joyce Johnson (joyce@springvale.org).

Thank you for your faithful support.

Please detach and complete the back of this panel...

From **SPRINGVALE'S Count Me In** strategy...*Be Intentional in giving...*

I never would have been able to tithe the first million dollars I ever made if I had not tithed my first salary which was \$1.50 per week.

John D. Rockefeller

"Bring the whole tithe into the storehouse, that there may be food in my house. Test me in this," says the Lord Almighty, "and see if I will not throw open the floodgates of heaven and pour out so much blessing that you will not have room enough for it."

Malachi 3:10

For Your Records

Springvale Baptist Church
info@springvale.org (905) 887-5651

Date (day/month/year) _____

Amount to be withdrawn \$ _____

To be drawn on the 1st and/or 15th of the month or weekly. Starting on (date) _____

Bank Name _____ Bank # _____ Transit # _____

Account # _____

I attached a "VOID" cheque.

Thank you for your faithful support.