



# Pre-Authorized Bank Withdrawal

## How it Works:

1. Fill in the authorization form (see reverse) and return it with one of your cheques (marked void).
2. Place this completed form and attached cheque in the Joy Box on Sunday morning or return it to the church office during the week.

## Some Common Questions:

1. Who manages the automated donation option?  
*The Accounting Assistant initiates and maintains donation requests with the bank. Your donation information will be handled privately, with YOU controlling the withdrawals from your account by what you direct us to do.*
2. What if I want to make an extra donation?  
*You can simply put it in an offering envelope on Sunday. It will be credited to your yearly giving but will NOT affect your automated donation agreement.*
3. What if I change banks?  
*Just give us a written notification of the change two weeks in advance of when you are changing.*
4. What if I want to change the amount being donated or want to stop donating?  
*Again, just give us a written notification two weeks in advance of any changes you want.*

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**Office/Study:**

#301-41340 Government Rd  
Brackendale, BC  
Eagle Run Village

**Mailing Address:**

The River Church  
PO Box 665  
Brackendale, BC  
V0N 1H0

**Contact:**

Pastor Darcy Reimer  
darcyr@intheriver.ca  
www.intheriver.ca  
(604) 848-8007



# Pre-Authorized Bank Withdrawal: Authorization and Enrolment Form

**Personal Information:**

Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Offering Envelope Number: \_\_\_\_\_

**Authorization:**

I choose to donate to The River Church (TRC) by having pre-authorized bank withdrawals and authorize TRC to automatically withdraw donations from my bank account.

I may revoke my authorization at any time, subject to providing notice of two weeks. To obtain a sample cancellation form, or for more information on my right to cancel a pre-authorized debit agreement, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).

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 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).

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

**Please attach a personal cheque marked VOID.**

**Date to Begin:**

\_\_\_\_\_

**Frequency of Gifts:**

\_\_\_ once a month: \_\_\_ 3<sup>rd</sup> or \_\_\_ 18<sup>th</sup>  
 \_\_\_ twice a month: 3<sup>rd</sup> and 18<sup>th</sup>

**How would you like us to apply the funds?**

Tithe: River Ministries:	\$ _____
River Care Fund:	\$ _____
Global Advance:	\$ _____
Canadian Ministries:	\$ _____
Missions (please specify below): _____	\$ _____
Other (please specify below): _____	\$ _____
<b>TOTAL DONATION:</b>	<b>\$ _____</b>

**This donation is made on behalf of:**

\_\_\_ an individual      \_\_\_ a business