



## BANK DEBIT PRE-AUTHORIZATION FORM

YES, I WISH TO SIGN UP AS A MONTHLY PARTNER AND SUPPORT THE MISSION OF BACK TO THE BIBLE CANADA ON A MONTHLY BASIS

BY SIGNING BELOW I AUTHORIZE BACK TO THE BIBLE CANADA TO DEBIT MY DONATION AMOUNT ON THE DATE INDICATED FROM MY BANK ACCOUNT. I UNDERSTAND THAT I CAN REVOKE THIS AUTHORIZATION AT ANY POINT BY CONTACTING BACK TO THE BIBLE CANADA IN WRITING OR BY TELEPHONE AT THE CONTACT INFORMATION BELOW.

**1** **NAME** \_\_\_\_\_  
**ADDRESS** \_\_\_\_\_  
**CITY** \_\_\_\_\_  
**POSTAL CODE** \_\_\_\_\_ **PHONE** \_\_\_\_\_  
(REQUIRED FOR TAX RECEIPT TO BE MAILED)

**2** **DONATION AMOUNT** \$ \_\_\_\_\_  
PLEASE PROCESS MY DONATION ON THE:  1<sup>ST</sup> - OR THE -  15<sup>TH</sup> OF EACH MONTH

**3** **SIGNATURE OF BANK ACCOUNT HOLDER** \_\_\_\_\_  
**HOW DO YOU LISTEN TO OUR BROADCAST?** \_\_\_\_\_

**4** **PLEASE MAIL THE COMPLETED FORM TO:**  
**BACK TO THE BIBLE CANADA**  
PO BOX 246, STN A  
ABBOTSFORD, BC V2T 6Z6

PLEASE **ATTACH A VOID CHEQUE** WHEN SUBMITTING THE FORM  
OR **FAX THE FORM AND VOID CHEQUE TO 604.746.3233**