

## PAR AUTHORIZATION FORM

(For new PAR donors and to make changes to banking details)

PAR Congregational Number:		
I/We,	(envelope #	), request and authorize The
United Church of Canada to debit	my/our account on the 20th of every r	month in the amount of \$,
starting on the 20th of	(enter month). This	s contribution is made on behalf of:
Name of Local Church:		
Address:		
City:	Province:	Postal Code:
This contribution by me/us to the	above local church is to benefit:	
Local Church \$	Mission and Service Fund \$	Other \$
This donation/payment is made b	y (check one): Individual(s)	Business
	Please attach a VOID cheq	ue.
Signed:	Date:	
<ul> <li>I may revoke my authorization at obtained from the Church PAR Cont</li> <li>I have certain recourse rights if an reimbursement for any debit that is recourse rights, I may contact my fir</li> <li>I waive my right to receive</li> </ul>	ontribution at any time subject to providing not any time, subject to providing notice of 15 days act or by contacting my financial institution or vary debit does not comply with this agreement. For not authorized or is not consistent with this PA nancial institution or visit <a href="https://www.cdnpay.ca">www.cdnpay.ca</a> .  pre-notification of the amount of the divance notice of the amount of PAR between time to provide the subject to providing the subject to providing the subject to providing the subject to providing notice.	rat which time I will submit a cancellation form visiting <a href="https://www.cdnpay.ca">www.cdnpay.ca</a> . For example, I have the right to receive R agreement. To obtain more information on my <a href="https://www.dpay.cd">Pre-Authorized Remittance (PAR)</a> and
ame of Church PAR Contact: Phone No.:		one No.:
people to use credit card	for Visa and MasterCard; we do not acce Is for PAR donations. However, if donors w	vish, this service is still available.
Debit My Credit Card Number:	CARD NUMBER	EXP
Name on Card:	Authorized Signature:	
	d apply all relevant provisions of the Canadian Payments Act and all related by confirmation/Pre-notification requirements or waiver of Pre-notification requirem	

**Church Name:**