

PRE-AUTHORIZED REMITTANCE FORM

Please print this form, fill it out, and mail it to Glory Lutheran Church
OR drop it off at the church (There is a mailbox outside the door if you are not there during office hours.)
OR scan the completed form and send to our Financial Secretary, Chelsea Ashton.
kurtisandchelsea@gmail.com
OR Call Chelsea (780-435-5998 (home), 780-984-7411 (cell)) and provide the information from your cheque and she will start the process.



DONOR INFORMATION

Please Print Name

Address City Province Postal Code

Telephone

PRE-AUTHORIZED REMITTANCE (PAR)

I hereby authorize **Glory Lutheran Church** to withdraw from my account monthly the amount of \$_____ on the _____ day of each month beginning on _____. (If anything other than monthly, please note here: _____ [e.g. bi-weekly])

My offering is to be designated to the General Fund unless otherwise specified (e.g. Capital Fund, Memorial Fund, etc.)

I may revoke this authorization at any time.

BANKING INFORMATION

Please COMPLETE THE FOLLOWING

OR attach a void cheque.

Bank Transit # _____ Bank # _____ Account # _____

(All numbers must be provided. They are usually in this order on the cheque - listed after the cheque number.)

Name of Bank: _____

Address City Province Postal Code

Signature

Date

PAYEE CONTACT INFORMATION – If any questions please contact the Church Office.

Glory Lutheran Church
22577 Highway 16, Sherwood Park, Alberta T8A 4T7
Phone: 780.416.9594