



# Pre-Authorized Automatic Bank Withdrawal Form

Return this completed form to:  
International Teams, Attn: Donor Services, 1 Union St. Elmira, ON N3B 3J9  
Or scan and email to: donor.services@iteams.ca

This is a *new* pre-authorized giving account, OR  
I am *changing*:  banking information  current giving amount  address  designation of donation

**Donor Information**

Name(s) \_\_\_\_\_ Circle: Mr. Miss. Ms. Mrs.  
Mailing Address \_\_\_\_\_  
\_\_\_\_\_

Tel (Home) \_\_\_\_\_ Tel (Work) \_\_\_\_\_

Email \_\_\_\_\_

**Designation of Funds & Amount:**

To:	\$ Amount
_____	_____
_____	_____
_____	_____
_____	_____

Total Giving Amount: \$ \_\_\_\_\_

**Donor Authorization for Automatic Withdrawal**

I hereby authorize International Teams to transfer the money indicated on this form each month from my bank account (attach a voided blank cheque for this account) on the  1<sup>st</sup> OR  16<sup>th</sup> of the month beginning \_\_\_\_\_ (month) of \_\_\_\_\_ (year).

Signature as required on cheque: \_\_\_\_\_

2nd signature (if required): \_\_\_\_\_ Today's Date: \_\_\_\_\_

**Cancellation Policy:** Monthly donations will continue to be processed until the donor requests a cancellation. To cancel a monthly donation please contact Donor Services a minimum of 10 days prior to the next processing date. Cancellation requests received less than 10 days before the next processing date may not be cancelled until the following month.