

BETHEL LUTHERAN CHURCH
Bethel Lutheran Educational Services (BLESS)
PRE-AUTHORIZED ELECTRONIC FUNDS TRANSFER

Name(s) of Parent(s):

Name of Child

Address:
.....

Telephone No.:

E-mail Address:

Designation for each Transfer

3 day program (\$170.00)

2 day program (\$150.00)

Donation (tax-receiptable)

Total of each Transfer

I (we) hereby authorize Bethel Lutheran Church the debiting of my (our) account by method of Electronic Funds Transfer as follows:

In the amount of \$ _____ on the 1st day of each month

Beginning Sept. 1, 2020 and continuing until May 1, 2021.

Note: Please attach a VOID cheque or completed "Pre-Authorized Debit/Credit Form".
Please do not write on the magnetic encoding found on the bottom of the cheque.

I further acknowledge by my signature, duly dated, that I (we) shall be responsible for any costs incurred by Bethel Lutheran Church that may arise from my failure to immediately advise Bethel Lutheran Church of any change, for any reason, to my (our) bank account number or address from the bank, from the foregoing information.

.....
Signature

.....
Date

.....
Signature

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Date