



PRE-AUTHORIZED DEBIT AGREEMENT (PAD)

I wish to support Camp Tulakadik through monthly charitable donations.

Please Debit my bank account:

- \$25
- \$50
- \$100
- OTHER AMOUNT:

*The Debit will be processed from your account on the 30th day of each month or the next business day.

Donor Name:

Date:

Signature:

Phone:

Email:

Address:

This donation is made on behalf of:

- AN INDIVIDUAL
- A BUSINESS

What is the best way to contact you?

- PHONE
- EMAIL

(Attach a void cheque or complete account information)

Account Number:

Financial Institution Number:

Financial Institution Name:

Branch Transit Number:

- CHEQUING
- SAVINGS

Branch Address:

Email your completed agreement to:

give@camptulakadik.com

Or send by mail to:

Camp Tulakadik
PO Box 367 | Norton, NB
E5T 1J7

***You may revoke your authorization at any time, subject to providing written notice within 10 days of scheduled debit to Camp Tulakadik via the contact information to the left. To obtain a sample cancellation form, or for more information on your right to cancel a PAD Agreement, contact your financial institution or visit www.payments.ca.

***You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on your recourse rights, you may contact your financial institution or visit www.payments.ca.

