



# PAR AUTHORIZATION FORM

- For registration of new PAR donors  
 or  
 For banking changes for existing donors

## FOR USE BY PAR ADMINISTRATOR

PAR congregational number: \_\_\_\_\_ 2040860 \_\_\_\_\_  
 Church PAR administrator: \_\_\_\_\_ SeanForeman \_\_\_\_\_  
 Phone number: \_\_\_\_\_ 902-402-4262 \_\_\_\_\_  
 E-mail: \_\_\_\_\_ sean.foreman@me.com \_\_\_\_\_

Donor name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

E-mail \_\_\_\_\_ Envelope# \_\_\_\_\_ Gift amount \$ \_\_\_\_\_

Name of local church: \_\_\_\_\_ ST. JOHN'S UNITED CHURCH, HALIFAX, NS \_\_\_\_\_

Address: \_\_\_\_\_ 6199 CHEBUCTO ROAD (MARITIME CONSERVATORY), HALIFAX, NS B3L 1K7 \_\_\_\_\_

This gift to the above church is to benefit

Local church: \$ \_\_\_\_\_ Mission & Service: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

## Option 1: Pre-authorized debit

Please attach a **VOID** cheque.

I/We request/authorize The United Church of Canada to debit my/our account on the 20th of every month, starting the 20th \_\_\_\_\_ of, 20\_\_\_\_. I/we also recognize and agree to the following:

- I/we may change the amount of my contribution at any time by contacting our church PAR contact.
- I/we have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAR agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).
- I/we waive my right to receive pre-notification of the amount of pre-authorized remittance (PAR) and agree that I do not require advance notice of the amount of PAR before the debit is processed.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

## Option 2: Visa/MasterCard/American Express

Please note that a 2–3% service charge reduces the total of your donation to your congregation.

Card number: \_\_\_\_\_ Expiry: \_\_\_\_\_  
MM YY

Name on card: \_\_\_\_\_

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

**Thank you for your generosity.**

The use, retention, and disclosure of personal information collected from this form is done in compliance with privacy legislation and adheres to the principles of the *Personal Information Protection and Electronic Documents Act (S.C. 2000, c.5)*.