

Pre-Authorised Remittance (PAR) Authorization Form

NOTE: If you are already on PAR and want to change your donation, just send an email to the appropriate treasurer stating the new monthly amount.

Name _____

Address _____

City _____ Postal Code _____

Phone # _____

Church (check one)

Parish of French Village

If you would like your offering to go to a specific church, please check one:

St. George's

St. James'

St. Margaret's

St. Paul's

My offering will be in the amount of \$ _____ on the ___ 1st or ___ 15th of each month, using automatic debit, appearing as "Donations Diocesan Synod" on your bank statement.

Please attach a "VOID" cheque or bank authorization letter.

I/We have read and understand the terms of this authorization and acknowledge receipt of a copy thereof.

Signature(s) _____

Date _____