

# PRE-AUTHORIZED DEBIT (PAD) AGREEMENT



5 International Blvd  
Etobicoke, ON M9W 6H3  
416 622 8600 • cboq@baptist.ca  
baptist.ca

By submitting this form, you verify that you are the person(s) authorized to sign for the provided account, and you authorize Canadian Baptists of Ontario and Quebec to debit your bank account for the purpose outlined below.

## Your Information:

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone \_\_\_\_\_ Email \_\_\_\_\_

## Debit Information:

I/we authorize CBOQ to make monthly withdrawals of \$\_\_\_\_\_ from the account starting on the last business day of \_\_\_\_\_ .  
(month)

The funds are designated for the following purpose(s):

- \$\_\_\_\_\_ General Fund
- \$\_\_\_\_\_ Youth Ministry
- \$\_\_\_\_\_ Local Missions Program
- \$\_\_\_\_\_ Fellowship Fund
- \$\_\_\_\_\_ Other (specify): \_\_\_\_\_ (subject to program availability)

I/we attach a VOID cheque.

Signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Additional signature and name – required for joint accounts)

I/we understand that:

- I/we may revoke my authorization at any time by giving 30 days notice to CBOQ in writing. To obtain a sample cancellation form, or for more information on my right to cancel a PAD Agreement, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).
- I/we have 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 PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).

*Spending of funds is confined to Board approved programs and projects. Each contribution designated towards a Board approved program or project will be used as designated, with the understanding that when the need for such a program or project has been met, or cannot be completed for any reason determined by the Board, the remaining amount from the contributions designated for such program or project will be used where needed most.*

Please return the completed form to the following address or by email to [finance@baptist.ca](mailto:finance@baptist.ca).

Canadian Baptists of Ontario and Quebec  
Attention: Finance Department  
5 International Blvd  
Etobicoke ON M9W 6H3