



Automated Donation Option Enrollment Form

I choose to donate to Strathmore Alliance Church through pre-authorized bank withdrawals and authorize Strathmore Alliance Church to automatically withdraw a monthly donation from my bank account in the amount listed below.

NAME: _____

ADDRESS: _____

CITY: _____

POSTAL CODE: _____

PHONE: _____

STARTING MONTH:

WITHDRAWAL DAY: 3rd day of the month
 18th day of the month

AMOUNT:

SIGNATURE: _____

INSTRUCTIONS

- Fill in this authorization form & return it with a sample cheque marked "VOID"
- Email this form along with the void cheque to office@strathmorealliance.com.
- If any of the deposit information changes please inform Strathmore Alliance office immediately, at least one week in advance of the next scheduled withdrawal.
- A tax receipt will be issued to you at the year's end for the total year's giving.
- If you would like to designate your donation to a specific ministry(s). Please mark accordingly below.

GENERAL:

CAPITAL:

MISSIONS:

BENEVOLENT:

OTHER:

TOTAL DONATION: \$