Reset

MoveIn

Pre-Authorized Giving Plan Authorization Form

CONTACT INFORMATION

Name: _____ Email: _____

Address: _____

City: _____ Postal Code/Zip: _____

Province/State: _____ Phone Number: _____

Donation is made on behalf of: ◯ An Individual ◯ A Business

BANK ACCOUNT INFORMATION

Please include a VOID CHECK to provide your banking details. The donation amount will be automatically deducted from this bank account.

Account Type: ◯ Checking Account ◯ Savings Account

When changing bank accounts, please send updated account information to our office in writing as soon as possible so the project is not affected.

PRE-AUTHORIZED DEBIT INFORMATION

I/We authorize the MoveIn Vision Team to debit my/our account indicated above, for the following amount, and designated to the following project/staff support:

◯ 1st business day of month ◯ On or after 15th business day of month

Amount: _____ Date of first withdrawal: _____

Designation (name of staff or project): _____

PRE-AUTHORIZED DEBIT CONSENT

I/We authorize MoveIn Vision Team to withdraw donations from my/our account, as if I/we had personally issued a cheque. This agreement may be cancelled at any time with written notice to the address below. I/We understand the Bank is not required to verify withdrawals. Delivering this authorization to MoveIn Vision Team is equivalent to delivering it to the Bank. I/We have recourse rights if any debit is unauthorized or inconsistent with this agreement. For details, contact your financial institution or visit www.cdnpay.ca. I/We confirm that I/we are authorized to sign on the account and approve automatic withdrawals as outlined.

Signature *(account owner):* _____ **Date:** _____

Signature *(if joint account):* _____ **Date:** _____

Please send this completed form with your void check:
Scan and email to donors@movein.to
Or mail: MoveIn Vision Team, 3003 Danforth Ave, PO Box 93582, Toronto ON M4C 5R4

For more information visit www.movein.global/give or email to donors@movein.to Canadian Revenue Agency Registration: 807015573RR0001. We will send a charitable tax receipt to you by post at the beginning of the next calendar year. Please contact us for any address changes.