

Messiah Lutheran Church - ACH Recurring Donation Authorization Form

Schedule your donation to be automatically deducted from your checking account. Just complete and sign this form to get started!

Recurring Donations Will Make Your Life Easier:

- It's convenient (saving you time and postage)
- Your donation will always be on time (even if you're out of town)

Here's How Recurring Donations Work:

- You authorize regularly scheduled debits to your checking account.
- Your account will be debited the amount indicated on your billing statement.
- Note: You must provide notification at least 21 days prior to your due date of any changes to your ACH
 account information.

Congregant Name:							
Please compl	ete thi	s information:					
	nt indi	cated below or next b		ess day ea	ch month for	•	o debit
Donate Weekly				Donate Monthly (15th)			
Billing Address				Phone #			
City, State, Zip				Email			
PLEASE ATT	ACH	A VOIDED CHECK	OR F	ILL OUT	THE INFO	RMATION BELO)W
Name on Account			Account Type		Checking	Savings	
Bank Name			Bank Routing #				
Bank City/State			Account #				
agreement, must be in	writing	rstand and agree that any and and be delivered to Messiah	Lutherai	n, at the abov	e address, at least	21 days prior to the nex	

agreement, must be in writing and be delivered to Messiah Lutheran, at the above address, at least 21 days prior to the next due date. If the donation date falls on a weekend or holiday, I understand and agree that the donation may be executed on the next business day. I understand and agree that as this is an electronic transaction, adequate funds must be available for withdrawal from my account by the donation due date. In the case of an ACH transaction being rejected for Non Sufficient Funds (NSF), submission error, or other bank related return reasons I understand and agree that Messiah Lutheran may at its discretion resubmit the ACH debit transaction within thirty (30) days. I acknowledge that the origination of ACH transactions to my account must comply with provisions of U.S. law and agree not to dispute this recurring billing with my bank so long as the transactions correspond to the terms indicated in this authorization form.

Signature:	Date:	