

MONTHLY PRE-AUTHORIZED DONATION PAYMENTS

I want to become a monthly donor of the Tsolum River Restoration Society ("TRRS"), PO Box 488, Merville, BC VOR 2M0 – Canada Revenue Agency Charitable Tax No. 89402 6921 BC0001

I wish to gift \$_____ per month (includes membership)

I, the undersigned, hereby authorize my banking institution to charge my account on the 15th day of each month and pay the TRRS the sum noted above. This authorization shall be the same as if I personally signed a cheque to the TRRS. I may terminate my participation in this program at any time upon written or email notification to the TRRS.

Signed: _____

Print Name: _____

Date: _____

Please sign, print your name and return this form with a VOID cheque by mail or in person. For further information please call 250 897-4670. An annual tax receipt will be issued and mailed to you .

Member Information:		
Name(s):		
Mailing Address:		
Email Address:	Phone:	