

# Guelph & Area Right to Life Monthly Membership Sign Up Form Pre-Authorized Debit Agreement



Guelph & Area  
Right to Life

Please return completed form to  
Guelph & Area Right to Life  
26 Norfolk St, Guelph, ON, N1H 4H8

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email Address \_\_\_\_\_

**I would like to become a member of Guelph & Area Right to Life through monthly giving.**

**Please debit my bank account:**  \$20  \$50  \$100  Other: \$\_\_\_\_\_

***Please attach a void cheque.*** This debit will be processed to your account on the 18<sup>th</sup> day of each month or the next business day.

This donation is made on behalf of  an individual  a business

*You, the Payor, may revoke your authorization at any time, subject to providing notice of 30 days. To obtain a sample cancellation form, or for more information on my right to cancel a PAD Agreement, you may contact your financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).*

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*You have certain recourse rights if any debit does not comply with this agreement. For example, you 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 your recourse rights, contact your financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).*