



# Iona-Hope Episcopal Church

# 2021

## Authorization Agreement for Automatic Withdrawal of Funds (Credit Card and Automatic Check Withdrawal)

**(This is not a pledge card, you must fill out a pledge card as well)**

Effective Date of authorization: _____	Type of authorization: <input type="radio"/> New authorization <input type="radio"/> Change amount <input type="radio"/> Change date <input type="radio"/> Change banking information <input type="radio"/> Discontinue electronic payment	
Full Name	Env. #	
Address		
Date of first donation: _____/_____/_____	Frequency of donation  Monthly – on the 15th	Amounts: \$_____ Operating \$_____ Rectors Disc. \$_____ Building Fund \$_____
Special Instructions:		
CHECKING / SAVINGS	Please debit my donation from my (check one):  <input type="radio"/> Checking Account (attach a voided check)	Routing Number _____  Account Number _____
	I authorize Iona-Hope Episcopal Church to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.	
	Authorized Signature: _____ Date: _____	
CREDIT CARD	Please charge my donation to my (check one): _____ Visa _____ MasterCard	
	Credit Card Number	Expiration Date:
	Name on Card	
	Billing Zip Code (if different from above)	
	I authorize Iona-Hope to charge my credit card in accordance with the information above. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.	
Authorized Signature: _____ Date: _____		

Return this form to: Iona-Hope Episcopal Church, 9650 Gladiolus Drive. Fort Myers, Florida, 33908