

PRE-AUTHORIZED GIVING

WHY

EASY CONVENIENT TIME - SAVING

St. Albert Alliance Church has an easy, convenient and time - saving way for you to deduct your gifts automatically from your Chequing or Savings account! It also helps St. Albert Alliance achieve better stewardship by saving us time and processing costs.

Pre-Authorized Giving (PAG) lets you donate a specific amount of money directly from your bank account each month to help support the Lord's work through St. Albert Alliance Church.

HOW

Step 1 Fill in the Authorization Form on the back of this card and return it with a VOID cheque.

Step 2 Put this form in the offering plate or return it to the Director of Operations at the church office during the week.

FAQ

Are there additional bank fees? No. There are no additional bank fees

Will I receive statements/receipts of my giving activities? Yes. Periodic statements and an annual income tax receipt for tax purposes will be provided for all qualified donations given during the calendar year.

What if I want to make an extra donation? Simply put the donation in the offering envelope on Sunday. It will be credited to your yearly giving but will not affect your automated donation agreement.

Can I make changes to my Pre-Authorized Giving? Yes. To suspend or discontinue your Pre-Authorized Giving, simply notify the church in writing. To make account changes fill out this application form and return to the church at least 2 weeks prior to your next payment.

Name _____ Daytime Phone # _____

Address _____ City _____ PC _____

Please enclose a personal cheque marked VOID.

Date to begin Pre-Authorized withdrawals: _____

Type of Account:

Chequings Savings Other Name of financial institution _____

Frequency of Donations: Once a month 3rd or 18th Twice a month 3rd and 18th

TOTAL MONTHLY DONATION.....\$ _____

Spending of funds is confined to Board approved funds or projects - each restricted contribution designated with the understanding that when the need for such a fund, program or project has been met, or cannot be completed for any reason determined by the Board, the remaining restricted contribution designated for such fund, program or project will be used where most needed.

Please specify these funds as follows

General Fund.....	\$ _____
Building Fund (The Seed Project).....	\$ _____
C&MA Global Advance Fund.....	\$ _____
C&MA Canadian Ministries.....	\$ _____
StAAC Missions Fund.....	\$ _____
Benevolent Fund.....	\$ _____
Church Planting Fund.....	\$ _____
Other _____	\$ _____
(must be approved by board)	\$ _____

TOTAL DONATION.....\$ _____

I/We authorize the financial institution named on this application to debit my/our account each month on the specified days for the specified amounts and to provide these payments to St. Albert Alliance Church. I/We affirm that all persons whose signatures are required to authorize withdrawals from the above account have signed this authorization. I/We hereby agree that the information contained in this authorization may be disclosed to the Royal Bank of Canada as required to complete this pre-authorized transaction. **(Please note that both signatures are required for joint accounts)**

Date _____ Signature _____ Signature _____

You can send or deliver your completed form with a VOID cheque to:

St. Albert Alliance Church
25416 S HWY 633
St. Albert, AB T8N 3X8
Attn: Director of Operations

Email: giving@staalliance.org

Thank you for your commitment to this intentional giving through the Pre-Authorized Giving Program!