



PRE-AUTHORIZED PAYMENT FORM AUTOMATIC FUNDS TRANSFER

I, the undersigned, authorize Northwest Baptist Seminary to withdraw \$ _____ on the first of each month beginning _____, 20__.

Please note that the withdrawal may be later than the 1st if the first of the month falls on a non-business banking day.

This support will continue until (check one):

- Indefinitely until we notify Northwest Baptist Seminary to cancel
- Specific Date _____ (please indicate end date)

These funds will be withdrawn by electronic transfer from your bank account to Northwest Baptist Seminary's bank account. In order to set up this funds transfer transaction, the following information is required:

Purpose of Payment _____

Please submit the following information (can be obtained from your bank) or attach a VOID cheque.

_____ 3 digit Institution Number

_____ 5 digit Bank Transit Number

_____ Bank Account Number

I understand that this transaction may be cancelled or changed by notifying the Northwest Baptist Seminary office in writing at least 30 days prior to your next transaction date.

Signed this _____ day of _____, 20__.

By: _____ (Name)

Address: _____

Signature: _____

Please send this form by mail or fax to:
Northwest Baptist Seminary, 7600 Glover Rd. Langley, BC V2Y 1Y1 or fax to 604-637-3212
admin@nbseminary.com