



House of Prayer Edmonton - Donation Form

Name: _____

Address: _____

_____ | _____ | _____
City Province Postal Code

Email: _____

Phone: _____

Mailing Address

6315 199 St NW
Edmonton AB T5T 6N2

ONE TIME DONATION

- I would like to provide a one-time donation to House of Prayer Edmonton
 - Make this a special designation for _____ (optional)

Gift Amount \$ _____

Make cheques payable to 'House of Prayer Edmonton'
For credit card, visit hopedmonton.ca/donate

MONTHLY PARTNERSHIP

- I would like to provide ongoing monthly donations to House of Prayer Edmonton
 - Make this a special designation for _____ (optional)

I understand that my pre-authorized donations to House of Prayer Edmonton will be processed on the 1st business day of every month

I understand that I must notify House of Prayer Edmonton in writing at least 7 days in advance of any change to this authorization

Attach Void Cheque

Gift Amount (per month)	\$ _____	Start Date:	_____
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TERMS OF AGREEMENT

By signing below, I give my authorization to charge my account at my bank, in the amount indicated above, the same as if I had personally signed a cheque made payable to 'House of Prayer Edmonton'. This authorization shall remain in effect until such a time as I notify House of Prayer Edmonton in writing that I wish to end this agreement, which I may do at any time. I also give House of Prayer Edmonton permission to contact me regarding my donations.

Signature: _____

Signature: _____

(If second signature is required on account)

FOR OFFICE USE ONLY			
Received:		First payment:	