

Church of the Nativity Capital Campaign "Building Up on Faith"
Electronic Fund Transfer (EFT) Program Application

For Church Office Use Only	Envelope #	Date
MEMBER AUTHORIZATION FORM		
Effective Date:	<input type="checkbox"/> Change Contribution Date	
<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change Financial Institution Account	
<input type="checkbox"/> Change Contribution Amount	<input type="checkbox"/> Discontinue Electronic Contribution	
Name of Member (s) (Please Print)		
Email Address		
Address		
City	State	Zip
CAPITAL CAMPAIGN CONTRIBUTION		
<input type="checkbox"/> Weekly(Transferred on Monday) <input type="checkbox"/> Semi-Monthly(Transferred on 1st & 15th) <input type="checkbox"/> Monthly (Transferred on either the 1st or the 15th of each month) CIRCLE ONE: 1st or 15 th		
Total Amount per Contribution		_____
Total Capital Campaign (Annual Contribution)		_____
Total Capital Campaign Contribution over Three Years		_____
Please take my contribution directly from the account specified: Checking Account (attach a voided check) Savings Account (attach a savings deposit slip)		
Routing # (between these symbols □:□:):		Account #:
I authorize Church of The Nativity to process debit entries to my account. I have attached a voided check or savings deposit slip. This authority will remain in effect until I give reasonable notification to terminate this authorization.		
Authorized signature on my account:		Date:

Please attach (staple or tape) voided check or voided savings deposit slip here (with account number shown)