



Authorization Form

Life Springs United Methodist Church

FOR OFFICE USE ONLY	DONOR #	DATE
----------------------------	----------------	-------------

Type of Authorization Form:

<input type="checkbox"/> New authorization	<input type="checkbox"/> Change banking/credit card information
<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation
<input type="checkbox"/> Change donation date	

Last Name First Name

Address

City State Zip

Email Address

Date of first donation: ____ / ____ / ____	Frequency of donation: (please check only one) <ul style="list-style-type: none"> <input type="checkbox"/> Weekly – Mondays <input type="checkbox"/> Semi-Monthly – 5th and 20th <input type="checkbox"/> Monthly on the 5th <input type="checkbox"/> Monthly on the 20th 	Church fund designations and amounts: <ul style="list-style-type: none"> <input type="checkbox"/> General/Operating \$ _____ <input type="checkbox"/> Other _____ \$ _____ <p style="text-align: right;">Total \$ _____</p>
--	--	---

Special Instructions:

CHECKING / SAVINGS	Please debit my donation from my (check one): <ul style="list-style-type: none"> <input type="checkbox"/> Savings Account (contact your financial institution for Routing #) <input type="checkbox"/> Checking Account (attach a voided check) 	Routing Number: _____ <i>Valid Routing # must start with 0, 1, 2, or 3</i>
		Account Number: _____

I authorize the above 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): <ul style="list-style-type: none"> <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover Card 	
	Credit Card Number:	Expiration Date:
	Name on Card:	
	Billing Address (if different from above):	

I authorize the above church to charge my credit card in accordance with the information above.

Signature (as it appears on the credit card): _____ Date: _____