

AUTOMATED GIVING ENROLLMENT FORM

It's easy to give to New Life Community Church by having your gift automatically deducted from your bank account.

To enroll, complete this form and drop it in the offering bag or mail to:
New Life Community Church
P.O. Box 830
Pulaski, WI 54162

General Information:

Name: _____

Address: _____

City: _____ State _____ Zip _____

Email: _____

Telephone number: _____

Select one of the following:

- New enrollment Change in amount* Change in account

Frequency and Amount of Transfers:

Monthly deduction(s) will be made on (check one):

- 1st 15th 1st & 15th Weekly (every Monday)

Amt written below is amount to be deducted on each occurrence checked.

Tithes & Offerings in the amount of \$ _____

Missions Fund in the amount of \$ _____

Total amount each occurrence \$ _____

When do you want your automated giving to begin? _____
month / day / year

*You can also use this form to change the amount of your automated gift. Account numbers are not needed to make a change unless you have a new or different bank or credit union.

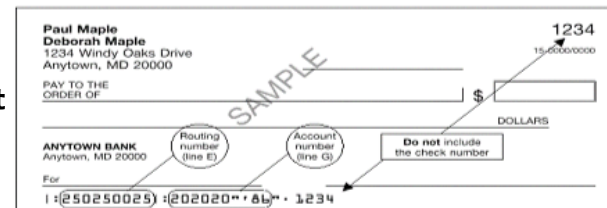
BANK DEBIT

- Enroll me in Automated Bank Debit**

Please make my gift payment directly from my:

- Checking** account

- Savings** account



Account number: _____

Routing number: _____

Please enclose a copy of a voided check

Authorization:

I authorize New Life Community Church to process debit entries to my account as indicated herein. I acknowledge the origination of these transactions to my account must comply with the provisions of U.S. law.

This authorization is to remain in effect until New Life Community Church has received written notification from me of its termination.

Authorized Signature: _____

Date: _____

All gifts are tax-deductible.