



AUTHORIZATION FORM

Pre-Authorized Debit Agreement

I / We hereby authorize the Society of St. Pius X Ontario to debit my / our **personal chequing** account on the 25th day of each month or the next banking business day.

My / our monthly donation is as follows:

SSPX Toronto New Church Building Fund

SSPX Toronto Regular Sunday Collection

Name of Contributor(s):

Address:

Tel:

Email:

Name of Financial Institution:

Account Number:

Please attach a VOID cheque

Signature of Contributor(s):

Note: the SSPX will pass on the \$25 fee charged by the bank for any NSF transactions.