Direct Debit/Credit Authorization for Congregation Beth Israel

1. Complete appropriate section for Debit/Credit card 2. Complete payment section 3. Sign, date & submit to Treasurer

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS
Please print clearly

Company Name: Congregation Beth Israel

Direct Debit: I/We hereby authorize Congregation Beth Israel hereafter called COMPANY to initiate debit entries to my (our) Checking account indicated below and the depository named below, hereafter called DEPOSITORY, to debit the same to such account.

Depository Name _____ Branch _____

City _____ State _____ Zip _____

Transit /ABA No. | | | | | | | | | | Account No. | | | | | | | | | | | | | | | | | | | |

This authority is to remain in full force and effect until COMPANY and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Credit Card*: I/We hereby authorize Congregation Beth Israel hereafter called COMPANY to initiate charges to my (our) credit account indicated below.

☐AX ☐Master card ☐Visa ☐Discover Credit card number: | | | | | | | | | | | | | | | | | |

Name as it appears on card _____ Verification Code (optional) _____

Billing Zip Code: _____ Expiration Date: _____

**A 3% convenience fee will be added to Credit Card payments.*

Amount Authorized _____ Circle Frequency ☐ Once ☐Monthly until paid in full

Date of requested withdrawal ☐ 15th or ☐ 30th Purpose: _____
(i.e. Membership Dues, High Holy Days, Donation, etc.)

Signed _____ Date _____