

**AUTHORIZATION AGREEMENT
FOR PREAUTHORIZED TITHES AND OFFERINGS**

New

Change

Effective Date: _____

YOUR NAME _____ ENVELOPE NO. _____

YOUR ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER _____ EMAIL _____

I hereby authorize SPRING CREEK CHURCH to initiate debit entries in the amounts indicated below from my checking account at the bank named below.

YOUR BANK NAME _____

BANK CITY _____ STATE _____ ZIP _____

TRANSIT/ABA NO. _____ ACCOUNT NO. _____

(Note: Please attach a voided check or a copy of a check for verification of bank information.)

FREQUENCY OF DONATION (CHECK ONE):

_____ Once per month on the _____ day of each month (example: 1st, 3rd, 5th, 15th, etc)

_____ Twice per month on the 1st and 16th of the month

_____ Once per week on Mondays

AMOUNT OF DONATION TO DEBIT FROM MY ACCOUNT EACH TIME:

MINISTRY FUND: _____

BUILDING FUND: _____

FELLOWSHIP FUND: _____

This authorization is to remain in full force and effect until SPRING CREEK CHURCH has received written notification from me of its termination or until such time as I submit a new Authorization Agreement changing the terms. If this is a joint account, both account holders must sign below.

Signature: _____ Today's Date: _____

Signature: _____ Today's Date: _____