AUTHORIZATION AGREEMENT FOR AUTO PAY OF MEMBERSHIP

Champion Forest Baptist Family Life Center

I, ______, hereby authorize Champion Forest Baptist Church Family Life Center to draft my membership dues in accordance with current membership rates as stated below from the following account until further notice.

I Savings account
I Checking account

Bank Name:	Amoun	t:
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Routing # (9 Digits): ______ Account #:_____ (*Account numbers are not the numbers listed on your credit/debit card. Please contact your financial institution for this information)

Circle one:

Monthly

Semi-Annually

Annually

The draft will occur on the 5th day of the month as instructed or the first business day following the 5th when the 5th falls on a weekend or bank holiday.

This authority is to remain in full force and effect until Champion Forest Baptist FLC has received written notification from me of its termination or change in such time and in such manner as to afford Champion Forest Baptist FLC and the above indicated Depository a reasonable opportunity to act on it.

Signature

Date

Attach a voided check if available. A deposit slip is not valid.