



NASHI
535 8th Street East
Saskatoon, SK S7H 0P9
PH: 306.281.9877

Email: admin@nashi.ca
Website: www.nashi.ca

PRE-AUTHORIZED DEBIT AGREEMENT

I want to support **NASHI** through monthly donations. This is your authorization to debit the indicated amount each and every month as a donation to NASHI until further notice.

Please attach a blank cheque marked “VOID”

Please indicate the monthly amount. Minimum monthly donation is \$15	
	\$15 per month (50 cents per day)
	\$30 per month (\$1 per day)
	\$60 per month (\$2 per day)
	\$90 per month (\$3 per day)
	\$_____ (amount of your choosing)

The debit will be processed to your account on the 20th of each month or the next business day.

This donation is made on behalf of: _____ an Individual _____ a Business

Donor Name: _____

Address: _____

Phone: (_____) _____ - _____ Email: _____

Signature: _____ Date: _____

I may revoke my authorization at any time, subject to providing notice of 30 days. To obtain a sample cancellation form, or for more information on my right to cancel a PAD Agreement, I may contact my financial institution or visit www.cdnpay.ca

I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca

NASHI is a Registered Charity (#853912194RR0001).

Charitable donation income tax receipts for pre-authorized debit transactions will be issued annually by the end of February of each year.