

Thank you for donating to Cascade PBS!

Fill out this form to make ongoing monthly or quarterly donations through automatic bank transfer (ACH).
 (You can also make your donation at CascadePBS.org/donate with your credit/debit card.)

1 member information

name _____ phone _____

address _____ email _____

city _____ province _____ postal code _____ donor number _____

2 donation information The debit will be processed on the selected day or the next business day.

_____ per month

donation amount (min \$5/month) _____ starting date _____

1st of month 20th of month

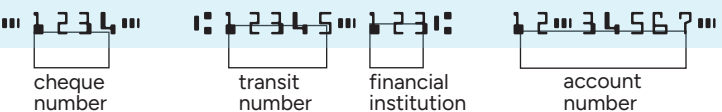
3 direct debit (ach)

debit from my: personal business bank account

transit # _____ financial institution # _____ account # _____

**** a blank cheque marked "void" must be sent with this form ****

memo _____



4 terms of agreement

My authorization for Cascade PBS to debit my donation from my bank account shall remain in effect until I notify Cascade PBS that I wish to end this agreement, subject to providing notice of fourteen (14) business days. 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 the PAD Agreement. To obtain a sample cancellation form, more information on my right to cancel a PAD Agreement or my recourse rights, I may contact my financial institution or visit cdnpay.ca.

signature _____ date _____

5 return this form and a voided cheque to:

Sustaining Membership
 Cascade PBS
 609-2818 Main Street
 Vancouver, BC V5T 0C1

questions?
 Please contact Member Services at
 1.800.937.5287 or customerservice@cascadepbs.org