



Direct Debit Monthly Pledge Form

With your authorization, your monthly pledge can be automatically deducted from your chequing account. You will receive an official income tax receipt for your total contributions at year end. For your convenience, this automatic withdrawal service will continue until you notify us otherwise. This plan is simple:

1. Print and Complete this form
2. Attach a blank cheque marked VOID
3. Mail the form and cheque to:

Envisage Pregnancy Services, 5 Sophia St. East, Barrie, ON, L4M 1Y1

Donor Name: _____

Address: _____

Phone: _____

Email: _____

I would like to receive updates via:

E-Newsletters:

Letter mail:

Monthly Donation Amount: \$ _____

I authorize Envisage Pregnancy Services to withdraw funds from my bank account (of attached VOID cheque)

on the 15th or 30th of each month, beginning _____ (date).

Signature: _____

Date: _____

Monthly donation arrangements can be changed or cancelled any time by contacting Envisage Pregnancy Services at info@envisagepregnancy.ca or 705-739-7280. Envisage respects your privacy and does not exchange names or other information with other organizations. Receipts are provided in February.
Charitable BN 84501 6526 RR 0001