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Download the Pre-authorized Deposit Form and send it in  
with your VOID Cheque.

**PRE-AUTHORIZED DEBIT (PAD) AGREEMENT**

I/We want to support Camp Kahquah through monthly donations

I am an existing monthly donor.

I would like to adjust my monthly giving amount: (attach VOID cheque)

From: \_\_\_\_\_ (specify) To: \_\_\_\_\_ (specify)

I am new to monthly giving:

Please debit my bank account: (attach VOID cheque)

\_\_\_\_\_ \$50 \_\_\_\_\_ \$100 \_\_\_\_\_ \$200 Other Amount \_\_\_\_\_ (specify)

*The debit will be processed to your account on the 1st day of each month or the next business day*

This authorization is starting \_\_\_\_\_ (month), \_\_\_\_\_ (year)

**Donor Name:**

**Address:**

**Email Address:**

**Signature:**

**Date:**

This donation is made of behalf of: \_\_\_\_\_ and Individual \_\_\_\_\_ a Business

I may revoke my authorization at any time, subject to providing notice of 30 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 this PAD agreement. To obtain more information on my recourse rights, I may contact my financial institution.