

Frequently Asked Questions

What is Pre-Authorized Giving (PAG)?

PAG is a service that lets you donate a specific amount of money directly from your bank account each month to help support the Lord's work through RockPointe Church.

Can I designate funds to a specific ministry?

YES! You will still be able to decide how your donation will be used.

Can I make changes to my PAG?

Absolutely! To change banks, accounts, or discontinue your PAG, please notify the church directly either in writing or by sending an email to finance@rockpointe.ca with the changes, prior to the 20th of the month.

Will I be charged by the bank for PAG?

No. There are no additional bank fees.

What if funds are unavailable in my account to meet the authorized amount?

RockPointe will be notified and will notify you.

Why should I participate in PAG?

- Convenience. Your offering is received automatically each month or as per your request.
- Continual support of your church when you're away.
- Continual support of RockPointe ministries and programs.
- Changes may be made at any time by emailing finance@rockpointe.ca.

Pre-Authorized Giving (PAG) Application Form

AUTHORIZATION TO COMMENCE OR CHANGE YOUR PAG

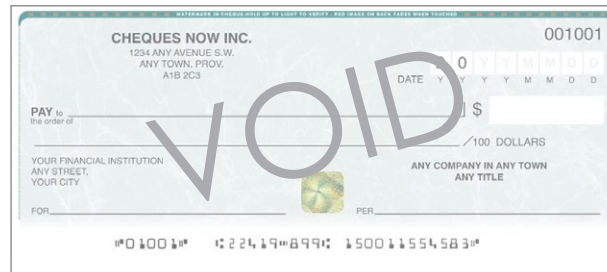
Name (s) _____

Address _____

Name of Financial Institution _____

Type of Account (check one)

- Chequing Savings
- Attached is my VOID cheque



NOTES:

- Applications should be received before the 20th of the month preceding the start date.
- Any PAG transactions that fall on a weekend or holiday will be processed on the first business day following the date of the scheduled transaction.

I currently attend the following site:

- Bowridge Bearspaw
 Westhills

Please debit my/our account as follows:

- Monthly Semi-Monthly Weekly
 2nd 17th
 Other _____ day(s) of each month

Please specify how you would like to direct your donations:

Amount	Fund	Previous Amount (if applicable)
\$ _____	Ministry Fund	\$ _____
\$ _____	Missions Fund	\$ _____
\$ _____	Compassion Fund	\$ _____
\$ _____	Development Fund	\$ _____
\$ _____	Other ()	\$ _____
\$ _____	Total Amount	\$ _____

I/We hereby authorize the financial institution named on this application to debit my/our account each month on the specified days, for the specified amounts and to provide these payments to: RockPointe Church. I/We affirm that all persons whose signatures are required to authorize withdrawals from the named account have signed this authorization. I/We hereby agree that the information contained in the authorization may be disclosed to the Royal Bank of Canada as required to complete this pre-authorized debit transaction.

Signature

(Both signatures are required for joint accounts)

Signature

(Both signatures are required for joint accounts)

Date
