

Automatic Donation Plan



I would like to support Forge Canada through monthly donations.

Please debit my credit card:

\$_____ (please fill in your credit card info below)

Which day you would like the money to be drawn:

1st or the 15th

Start Date: ____/____/____
Month Year

I would like my donation to support:

Forge Team Member Provide a scholarship Where most needed

Name: _____

Donor Name(s): _____

Visa / Mastercard (Circle One):

Name on the Card: _____

Credit Card #: _____

Expiry Date (mm/yy): _____ CSC Code**: _____

Billing Address of Credit Card: _____

Billing Address Continued: _____

**The CSC Code is a 3-digit number printed on the back of your credit card.

Date:

Signature: X _____

Donation receipts will be mailed to on an annual basis

Thank you for your support.

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. I may revoke my authorization at any time, subject to providing notice of 14 days. To cancel your debit please email us at the address below.