

**Pre-Authorized Debit (PAD) Agreement
Brahmananda Saraswati Foundation of Canada**

I want to support the training of Maharishi Vedic Pandits as world peace professionals through:

Monthly donation _____ One-time donation _____ Other _____

Please debit my bank account for the amount of:

\$25 _____ \$50 _____ \$75 _____ Other Amount \$ _____

The debit will be processed to your account on the 18th day of each month or the next business day.

This donation is made on behalf of: an Individual _____ a Business _____

I, the undersigned, authorize the Brahmananda Saraswati Foundation of Canada to debit the amount I have specified from the bank account number on my cheque.

Donor Name:

Mr. Mrs. Ms. _____

Name of Company: (if applicable) _____

Address: _____

Tel: _____ Email: _____

Date: _____ Signature: _____

I may revoke my authorization at any time, subject to providing notice of 15 days. To obtain a sample cancellation form, or for more information on your right to cancel a PAD Agreement, I may contact my financial institution or visit www.cdnpay.ca.

Complete this form and include a Void Cheque from your bank account:

- **To send by Email:** Use your scanner or take a cell phone photo of the completed form and your Void cheque. Email to: finance@bsf-canada.org
- **To send by Post:** Brahmananda Saraswati Foundation of Canada
PO Box 78072 RPO MERILINE, Nepean, ON, K2E 1B1

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 or visit www.cdnpay.ca.

Contact Email: donations@bsf-canada.org