



IMMANUEL CHRISTIAN SCHOOL

A Christ-centred innovative learning community.
SINCE 1985

MONTHLY PLEDGE FORM

Name: _____ Telephone: _____
Address: _____ City, Prov: _____
Email: _____ Postal Code: _____

Monthly donation amount: \$ _____

Pre-authorized Payments

\$ _____ monthly for _____ months, beginning _____ .

Via automatic bank withdrawal on the 15th of each month. *(Please fill out the enclosed PAD form and attach a void cheque.)*

E-transfers

\$ _____ monthly for _____ months, beginning _____ .

Online Payments through Pay-Pal

\$ _____ monthly for _____ months, beginning _____ .

Pay Pal gives you the convenience of using a credit card, but they will take 1.9% of each donation as their fee and you will have to remember to make your monthly donation.

By Post-dated or monthly cheques

\$ _____ monthly for _____ months, beginning _____ .

Signature: _____ Date: _____

Please note: All donations from within Canada are tax deductible and will be receipted. Registered Charitable Taxation Number: 10750 3575 RR0001

We are so very thankful for your support!