

CHREDA is pleased to offer two payment options:

1. PRE-AUTHORIZED MONTHLY PAYMENTS

Name(s):

TIOTE	
Please attach a VOID che	eque to this application.
I authorize CHREDA to electronically withdraw funds from my bank account for Christian Programming Fees in the amount of \$ on the day of each and every month consecutive from September – June each year: 1st day of the month 15th day of the month 20th day of the month	
	unts or wishes to amend this agreement, it is the responsibility of
	A in writing at least 30 days in advance of the next pre-
authorized debt. Fill out this form an	nd return it to the CHREDA Office Manager's email with a scanned image of your VOID cheque
Signature:	Date:
Lump Sum Credit Card I	(or) Payment (full payment will be taken Aug. 31, 2021)
Name on Credit Card:	
Credit Card Number:	Expiry Date:
I authorize CHREDA to charge \$ the last	my credit card for Christian Programming Fees in the amount o t day of August each year.
Signature:	Date:
Signature:	Date: