# **3. GIVING OPTIONS**

# **AUTOMATIC MONTHLY WITHDRAWAL / CHARGE**

□ I hereby give Power to Change Ministries permission to make monthly withdrawals/charges from my bank account/credit card in the amount indicated on the opposite side of this form. I understand that this transfer will continue until I otherwise notify Power to Change.

Signature \_\_\_\_\_

## **CREDIT CARD**

| 🛛 Visa      | MasterCard | American Express |  |  |  |
|-------------|------------|------------------|--|--|--|
| Card No.    |            |                  |  |  |  |
| Expiry Date |            | Date Signed      |  |  |  |
| Name on     | Card       |                  |  |  |  |
| Signature   | 2          |                  |  |  |  |

# CHEQUE

□ I have enclosed a void cheque with my bank account details to set up monthly gifts.

□ I have enclosed the first month's donation by cheque with bank account details to set up monthly gifts.

□ I am already a monthly supporter. Please add this monthly gift to my existing donation.

□ I have enclosed a cheque as a one time gift.

Please make your cheque(s) payable to **"Power to Change"** and return them with this form. You may include postdated cheques for monthly giving.

In cases where a cheque is submitted, receipts will be issued to the name on the cheque as per CRA regulations.

Your support is very important to our ministry. We take every step necessary to ensure your money is used in a responsible and Christ-like manner. If you have any questions, please feel free to contact Partner Care at:

#### 1.855.P2C.GIVE (722-4483) or via email at give@p2c.com

# **PLANNED GIVING**

□ I would like to talk with someone regarding tax deductible gifts of securities, insurance policies or real estate.

## **TERMS OF AGREEMENT**

I understand that the permission to charge my bank account or credit card company is the same as if I had personally signed a cheque to Power to Change. This agreement will remain in effect until I have given reasonable notice to Power to Change instructing them to end this agreement.

I understand that my bank or credit card company is responsible for timely postings of all transactions from my account. If there are any discrepancies in the amount that has been transferred from my account in a given month, I will contact Power to Change directly for updates and correction.

While Power to Change seeks to honour the expressed preference of each gift, I acknowledge that my gift is a gift to the ministry of Power to Change. As such, I understand that even though I have expressed my preference, Power to Change must retain the discretion to use my gift as it believes will best advance its charitable purposes. If my preference changes, it is my responsibility to inform Power to Change.

#### **PRIVACY POLICY**

At Power to Change we respect your privacy and the laws governing it, and are committed to keeping your personal information private between us. To demonstrate this commitment, we have adopted a Privacy Code that lists the privacy principles we observe. This Privacy Code is freely available from our Corporate Privacy Officer or at p2c.com.

## **CANCELLATION OF AGREEMENT**

You may revoke your authorization at any time, subject to providing notice of cancellation at least 15 days prior to date of cancellation. You may obtain a sample cancellation form, or for more information on your right to cancel a Pre-Authorized Debit Agreement, you may contact your financial institution or visit www.payments.ca.

#### **RECOURSE/REFUND STATEMENT**

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to be refunded for any debit that is not authorized or is not consistent with this pre-authorized debit Agreement. To obtain more information on your recourse rights, contact your financial institution or visit www.payments.ca.

Athletes in Action | Christian Embassy | DRIME Connecting Streams | FamilyLife | Global Aid Network Jesus Film Church Planting Strategy | LeaderImpact P2C-Digital Strategies | P2C-Students | WHEN

# p2c.com give@p2c.com 30439 Great Northern A

TF: 1.855.722.4483 P: 604.514.2000 F: 604.514.2061 f y 😰

# FINANCIAL PARTNERSHIP



# I always pray with joy because of your partnership in the gospel from the first day until now.

**Philippians 1:4–5** 



"On behalf of our staff and ministries, I want to thank you for your partnership in helping people know Jesus and experience His power to change the world. Your involvement will make a difference in thousands of lives."

DARREN YOUNG

# **Steps to Complete**

You can also make donations online. Visit p2c.com/donate to make a donation or become a monthly partner.

# Fill out your personal information.

Your full name and address are required to issue an official tax receipt at the end of each calendar year.

2 Choose a project, ministry or the ministry of a staff member. Decide how much you would like to give and what or who it is for. Be sure to indicate whether it is a monthly or a one-time gift.

# Complete your giving information.

On the opposite side of the form indicate whether funds will be withdrawn from your bank account, debited to your credit card, or if a cheque is enclosed.

**To begin an automatic bank withdrawal,** enclose a void cheque or a cheque made payable to "Power to Change" for your first contribution. This will ensure that we have the necessary bank and account information to begin future automatic transfers. Allow at least two weeks to process a new application, change or cancellation.

#### Detach the form and send it to:

Power to Change Ministries Attn: Partner Care 30439 Great Northern Ave, Abbotsford, BC V2T 0J6

Be sure to read the important information on the back of this brochure.

# **1. PERSONAL INFORMATION**

| Title                | 🗖 Mr. | 🛛 Mrs. | 🗖 Ms. | 🗖 Dr. |  |  |  |  |
|----------------------|-------|--------|-------|-------|--|--|--|--|
| First Name           |       |        |       |       |  |  |  |  |
| Middle Name          |       |        |       |       |  |  |  |  |
| Last Name            |       |        |       |       |  |  |  |  |
| Spouse's Full Name   |       |        |       |       |  |  |  |  |
| Spouse's Middle Name |       |        |       |       |  |  |  |  |
| Address              |       |        |       |       |  |  |  |  |
|                      |       |        |       |       |  |  |  |  |
| -<br>Home Phone ()   |       |        |       |       |  |  |  |  |
| Work Phone ()        |       |        |       |       |  |  |  |  |
| Cell Phone ()        |       |        |       |       |  |  |  |  |
| Email                |       |        |       |       |  |  |  |  |

Would you like to receive email?

From Staff: 🛛 Yes 🖾 No 🛛 From Power to Change: 🖵 Yes 🗔 No

Would you like to receive your tax receipt via email?

🛛 Yes 📮 No

# **2. PREFERRED GIFT DESIGNATION**

My preference is that my gift to Power to Change be used for the following:

| Ministry of Staff Member: | Monthly | One-Time |  |
|---------------------------|---------|----------|--|
| 1                         | 🗅 \$    |          |  |
| 2                         | \$      |          |  |
| 3                         | □ \$    |          |  |
| Ministry:                 | Monthly | One-Time |  |
| 4                         | 🛛 \$    |          |  |
| 5                         | 🛛 \$    |          |  |
| 6                         | □ \$    |          |  |

For monthly transfers please complete the following:

Transfer date 🖸 1<sup>st</sup> 🗖 8<sup>th</sup> 🗖 15<sup>th</sup> 🗖 22<sup>nd</sup>

Commencing (month & year) \_

XM000SF001

