



Partner in Pride Donation Authorization Form

INFORMATION

Name: _____
 Billing Street Address: _____
 City: _____ State: _____ Postal Code: _____
 Country: _____ Email: _____
 Mailing Address (if different): _____
 Telephone: (____) ____ - _____

Fund Name or Donation Purpose: **PARTNER IN PRIDE**

Please choose one:

- I authorize a recurring charge against my credit card for the following amount
- I authorize a recurring ACH debit for the following amount

\$ _____ once every month and ending when notified in writing

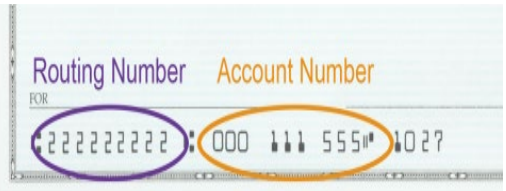
CREDIT CARD INFORMATION

Credit Card Type: MasterCard Visa American Express Discover Card
 Name on the card: _____
 Number: _____
 Expiration Month: ____ Expiration Year: ____ Security Code: _____
 Cardholder Signature X _____ Date: _____

ACH PAYMENT AUTHORIZATION

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Account Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
Name on Acct _____	
Bank Name _____	
Account Number _____	
Bank Routing # _____	
Bank City/State _____	



SIGNATURE _____ DATE _____

I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted transaction date. In the case of the payment being rejected for Non Sufficient Funds (NSF) I understand that <insert your company name> may at its discretion attempt to process the charge again within 30 days, and I agree to an additional <insert \$> charge for each attempt returned NSF, which will be initiated as a separate transaction from the authorized payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I will not dispute <insert your company name>'s billing with my bank so long as the transaction corresponds to the terms indicated in this agreement.