Christian Burial Fund
Christian Immigration Society

CISBF PAYMENT FORM

Please provide the following information to process payment for a new membership and bi-annual invoices. Upon receipt of this form, it will go into effect for the next billing cycle. Invoices are issued at the beginning of January and July. Please ensure funds are available in your account on the 31st day of these two months.

CISBF MEMBER INFORMATION			
LAST NAME	FIRST NAME		
ADDRESS	CITY	PROV	P. CODE
APPLICANT EMAIL	CELL	HOME	

Membership Fee (ages 18-29): $11.00 + GST = $11.55 **Entrance Fee (ages 30+):** Based on age

CISBF APPLICATION — PAYMENT OF MEMBERSHIP FEES, ENTRANCE FEES, LATE PAYMENTS

(1) E-TRANSFER: Through online banking send to cis@christianburialfund.com (no password required)
(2) CHEQUE: Mail or pay in person at the CISBF Society office (address below)

CISBF MEMBERSHIP — PAYMENT OF BI-ANNUAL BILLING | PRE-AUTHORIZED DEBIT (PAD)

I/We authorize the Christian Immigration Society Burial Fund to debit my bank account for the amount that is indicated on the CISBF Invoice and as follows:

- The debits are scheduled to take place on **January 31st** and **July 31st** of each year.
- These services are for business use funds transfer.
- This debit amount is subject to change.

I/We may revoke my authorization at any time, **subject to providing notice of at least 30 days in advance of the next pre-authorized debit**.

I/We have certain recourse rights if any debit does not comply with this PAD 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 a sample cancellation form, or for more information on recourse rights, contact your financial institution or visit www.cdnpay.ca.

Please include one of the following bank documents with this form:

☐ VOID Cheque ☐ Direct Deposit Form (access through online banking)

*** All payments require the correct spelling of the member's full name ***

CISBF MEMBER SIGNATURE		
APPLICANT (FULL NAME)	DATE	SIGNATURE (if electronic type full name)

c/o Christian Credit Union
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www.cischristianburialfund.com | cis@christianburialfund.com

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