



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

In the Name of Allāh, the Most Gracious, the Most Merciful

Brampton North Learning Center
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BRAMPTON NORTH LEARNING CENTER PLEDGE / DONATION FORM

First Name: _____ Email Address: _____
Last Name: _____ Contact Telephone Preferred: (____) _____ - _____ Home Mobile
Address: _____ City: _____ Postal Code: _____

Pledge / Donation Amount

I am pleased to support Brampton North Learning Center

OR

Monthly One time donation
 \$50 \$75 \$100 Other \$ _____ \$250 \$350 \$500 \$1000 Other \$ _____

Method of Payment (please select by checking one of the four payment options)

By Post-dated Cheques (Please make cheques payable to "Brampton North Learning Center") **Cash**
 By pre-authorized deduction from my bank account * **By Credit Card** VISA MasterCard
(Please attach a void cheque with this form) **OR**

Name of Financial Institution: _____ Credit Card Number _____
Institution Code: _____ Expiry date: ____/____/____
Account # _____ MM YYYY 3 Digit Validation Code on back of card
Transit# _____ Signature of Cardholder _____
 Chequing Savings Other
Please start my payments on: ____/____/____
MM DD YYYY
 Monthly One time donation Monthly One time donation

I/ We agree Brampton North Learning Center may process charges to my/our account for the purpose of pledge/donations and will make payments as per indicated above (Monthly or One time donation)

Signature _____

Date _____

PLEASE NOTE: Completed forms along with payment may be deposited in donation box at the Brampton North Learning Center.

* Any delivery of this request to the bank will constitute delivery by me. I/we have the right to terminate this PAD agreement at any time upon a written notice from me. I may also terminate this PAD Agreement at my Bank, or send a Cancellation form which I can obtain from my Bank, or by visiting www.cdnpay.ca. * I/we have the right to receive reimbursement of any debit that is not authorized or if it is not consistent with this PAD agreement. To obtain more information on my/our recourse rights, I/we may contact my/our financial institution, or visit www.cdnpay.ca.