



St. Isidore Roman Catholic Parish  
1135 March Road • Kanata ON • K2K 1X7 • 613 592-1961  
www.stisidorekanata.com

**Donation by pre-authorized bank debit - PAD**

NAME (Family): \_\_\_\_\_ NAME (First): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE (Home): \_\_\_\_\_ PHONE (Mobile): \_\_\_\_\_

Please debit my bank account **monthly** as follows:

Amount: \$ \_\_\_\_\_

On the \_\_\_\_\_ 1<sup>st</sup> of the month

On the \_\_\_\_\_ 15<sup>th</sup> of the month

Please attach a copy of a void cheque to a signed copy of this authorization.

For security reasons, you are advised to return this form and void cheque hand delivered to the Parish Office, or by Canada Post, or in a sealed envelope put in the Sunday collection basket.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***This authorization may be cancelled by email, or written notice, by you at any time.***