

**Electronic Fund Transfer (EFT) Enrollment Form**

**AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS**

Company Name: **St. Francis Xavier Basilica**

I (We) hereby authorized **St. Francis Xavier Basilica** to initiate electronic debit entries to my account indicated below to fulfill my contribution to the parish budget. I am supplying my financial institution's (Depository's) name and my account below.

\_\_\_\_\_  
Depository Bank

\_\_\_\_\_  
City

\_\_\_\_\_  
State/Zip Code

Pledged Sacrificial Giving amount to be deducted \$ \_\_\_\_\_ weekly on Monday.

This authorization is to remain in full force and effect until **ST. FRANCIS XAVIER BASILICA** has received written notification from me or either of us of its termination/modification in such time and in such manner as to afford **ST. FRANCIS XAVIER BASILICA** and **DEPOSITORY** a reasonable opportunity to act on it.

Print Name: \_\_\_\_\_

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

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

**\*\*\* A VOIDED CHECK MUST BE ATTACHED TO THIS ENROLLMENT FORM\*\*\***