_____Changes to an Existing ACH Form

New ACH Enrollment Form

An EFFORTLESS way to contribute: Bank to Bank!



Theresians International & Theresian Foundation

AUTHORIZATION TO OBTAIN MY CONTRIBUTION TO FROM MY BANK ACCOUNT

| I hereby authorize <i>Theresians International</i> or the <i>Theresian Foundation</i> to obtain my contribution from my bank account using the following information: |
|---|
| Amount I wish to contribute: |
| Frequency: MONTHLY on the day of the month (or the next business day if this day of the month falls on a weekend or a holiday.) Effective Date: |
| COMPLETE THIS INFORMATION AND ATTACH A VOIDED CHECK: |
| Name of Bank where you have your account: |
| Transit Routing Number of bank: |
| (Located on left side of your check and is a 9-digit number) |
| Account Type: Checking Savings |
| Account No |
| Name(s) on Account: |
| Account Holder Signature: |
| Date: |