



AUTOMATED BANK DEBIT ENROLLMENT

To enroll, please complete this form and mail with a voided check to:

EastLake Church SLC c/o Accounting Dept.
PO Box 1655 • Salt Lake City, Utah 84110

INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Check one of the following

- New enrollment Change donation Change banking information
 Change donation date Discontinue electronic donation

Please select the frequency and amount of transfers

1st of every month or next business day in the amount of \$ _____

15th of every month or next business day in the amount of \$ _____

1st & 15th of every month or next business day in the amount of \$ _____

When do you want the Auto Debit to begin (date of first transaction)? _____

ACCOUNT INFORMATION

Please take my gift payment directly from my:

Checking Account (attach voided check or deposit slip) Account # _____

Savings account (attach deposit slip) Routing # _____

AUTHORIZATION

I authorize EastLake Church and Vanco Services, LLC to process debit entries to my account as indicated herein. I have attached a voided check. This authority will remain in effect until I give reasonable notification to terminate this authorization.

Authorized Signature _____ Date _____

**All gifts are tax—deductible*

**If you have questions, contact EastLake Church at 801-824-8917 or info@eastlakeslc.com*

****ATTACH VOIDED CHECK TO THIS FORM****