



## Auto-Tithing Enrollment Form

I (we) wish to enroll in the Unity auto-tithing contribution program. I (we) hereby authorize Unity of Phoenix or its agents to initiate debit entries to my (our) bank account or to charge my (our) credit card and I (we) authorize my (our) bank to transfer to Unity of Phoenix as indicated below. This authority is to remain in full effect until Unity of Phoenix has received written notification from me (or either of us) of its termination or change in such time and manner as to afford Unity of Phoenix to act on it.

I would like my direct debit added to the General Fund each month as follows: 2<sup>nd</sup> of month \$\_\_\_\_\_ 16<sup>th</sup> of month \$\_\_\_\_\_  
(or)

I would like my credit card to be charged each month as follows: 2<sup>nd</sup> of month \$ \_\_\_\_\_ 16<sup>th</sup> of month \$ \_\_\_\_\_

Please activate this program for me beginning \_\_\_\_\_.

\_\_\_\_\_  
(printed name)

\_\_\_\_\_  
(printed name)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(date)

**Staple voided check here or fill in savings account information or fill in credit card information**

Bank Name \_\_\_\_\_ Bank phone number \_\_\_\_\_

Savings account # \_\_\_\_\_ Savings account routing # \_\_\_\_\_

Card Type \_\_\_ Visa \_\_\_ MasterCard \_\_\_ American Express Expiration \_\_\_\_\_

Card Number \_\_\_\_\_ Verification code \_\_\_\_\_

Name as it appears on card \_\_\_\_\_