



Member Enrollment and Authorization Form

Return completed enrollment form to the Lutheran congregation benefiting from your giving.

Complete this section for **ALL ENROLLMENTS** (Please print in black ink)

Check the appropriate box: <input type="checkbox"/> New enrollment/authorization * <input type="checkbox"/> Change in bank account * <input type="checkbox"/> Change in authorized amount <input type="checkbox"/> Discontinue electronic payment	Last Name		First Name		M.I.
	Mailing Address				
	City		State	Zip	
	Home Telephone #		Cell Phone #		
	Email Address				

Please debit payments/donations from my (check one):

Checking Account (attach a voided check below)

Savings Acct (contact your financial institution for Routing #)

Routing Number: _____
Valid Routing # must start with 0, 1, 2, or 3

Account Number: _____

REQUIRED:
I authorize Vanco Payment Solutions and the church listed on this form to automatically withdraw donations/payments from my account as instructed on this authorization form. I understand this authority will remain in effect until I provide reasonable notification to terminate the authorization.

Account Holder Signature _____
Date _____

*** ATTACH A VOIDED CHECK OR SAVINGS DEPOSIT SLIP FOR A NEW ENROLLMENT OR CHANGE IN BANK ACCOUNT ONLY**

Complete this section for *Lutheran* **CONGREGATION DONATIONS**

Congregation Name: Beautiful Savior Lutheran Church		Street Address: 2601 23rd Ave. SW	
City: Fargo		State: ND	Zip: 58103
Church Fund Designations:	Amount Per Donation:	Frequency of Donation: (Please check only one)	
General / Operating	\$ _____	<input type="checkbox"/> Weekly (transferred on Monday each week)	
Building	\$ _____	<input type="checkbox"/> Bi-Weekly (transferred on Monday every other week)	
Restore His House Capital Camp	\$ _____	<input type="checkbox"/> Semi-Monthly (transferred on the 1st and 15th of each month)	
	\$ _____	<input type="checkbox"/> Monthly on the 1st	
	\$ _____	<input type="checkbox"/> Monthly on the 15th	
TOTAL DONATION AMOUNT	\$ _____ (minimum \$10)	Date of First Donation: _____	
Note: The total amount will be transferred based on the frequency selected.		Church Envelope Number: _____	

* Attach Voided Check here

*** REQUIRED *** MUST BE COMPLETED BY CONGREGATION / INSTITUTION			
Congregation / Institution Code: 504750201	Envelope Number: _____	Verifier Initials: _____	Date: _____



A simple choice; a generous response

The *Simply Giving*® Program

Through *Simply Giving*®, your offerings are made through a pre-authorized withdrawal from your bank account. You determine the frequency of your automatic donation - weekly, bi-weekly, semi-monthly, or monthly - the option is yours. Your donation is deposited into the recipient's bank account the same day it is withdrawn from your account.

Benefits to you and...

Your Congregation

Simply Giving® is a reliable, safe way to move your stewardship plan into action. It allows you to share your donations through planned giving and activates your generosity into ongoing stewardship. Because your donation is given consistently, you won't need to play "catch-up" at year-end or worry about forgotten checkbooks or missed Sunday offerings. But you're not the only one that benefits. Your congregation benefits from steady, more predictable revenues throughout the year, more efficient bookkeeping, and greater confidence in meeting its financial commitments.

How do I participate?

First make sure the institution you wish to benefit is enrolled in *Simply Giving*®. Then complete the form on the reverse side and return it to the congregation that will benefit from your giving.

How do I cancel or change my authorization?

Contact the institution benefiting from your giving.

Who do I call if I have more questions about the *Simply Giving*® program?

Contact the institution benefiting from your giving.

ENROLLMENT INSTRUCTIONS:

1. Using black ink, complete the personal information section including name, address and telephone numbers.
2. Indicate whether this is a new enrollment/authorization, a change in amount, or a change in bank account.
3. Indicate the account type, routing number and account number. Attach a voided check or savings deposit slip to the enrollment form for a new enrollment or change in bank account.
4. **Sign and date the Account Holder Signature section.**
5. Complete the appropriate section with the institution name and address that will benefit from your giving.

For Your Lutheran Congregation Offering:

- Designate which fund(s) your donation should go to and the amount.
- Select the frequency of your offering.

6. **Return the completed enrollment form to the Lutheran congregation benefiting from your giving.**

PRIVACY / CONFIDENTIALITY:

The Authorization Form on the back is seen by the nonprofit Lutheran organizations enrolled in *Simply Giving*® as well as by the Vanco Payment Solutions employees who process it. Participant information will not be shared with any other organizations.

See reverse side for Authorization Form.