

# GIVE CONTINUOUS SADAQA JARIYAH BY ENROLLING IN AUTOMATIC CHECKING WITHDRAWAL

## SEND A **VOIDED CHECK** OR **FILL OUT THIS FORM**

### ACH Recurring Payment Authorization Form

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your checking or savings account. You will be charged the amount indicated below each billing period. A receipt for each payment will be emailed to you and the charge will appear on your bank statement as an "ACH Debit." You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

Please complete the information below:

I \_\_\_\_\_ authorize Nur Islamic School of Louisville to charge my bank account indicated below  
(FIRST AND LAST NAME)

on the \_\_\_\_\_ of each month for payment of my donation.  
(DAY)

\$500/MONTH

\$350/MONTH

\$250/MONTH

\$100/MONTH

\$75/MONTH

\$50/MONTH

\$25/MONTH

\$\_\_\_\_/MONTH

Billing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_

Account Type:  Checking  Savings Name on Acct (If Different From Above): \_\_\_\_\_

Bank Name: \_\_\_\_\_ Bank City/State: \_\_\_\_\_

Bank Routing #: \_\_\_\_\_ Account Number: \_\_\_\_\_

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



I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Nur Islamic School of Louisville in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted periodic payment dates fall on a weekend or holiday, I understand that the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I understand that Nur Islamic School of Louisville may at its discretion attempt to process the charge again within 30 days, unless notified 15 days prior to the transaction date. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

YOU MAY ALSO MAKE A DONATION BY CHECK PAYABLE TO:

**NUR ISLAMIC SCHOOL OF LOUISVILLE**

6500 SIX MILE LANE LOUISVILLE, KY 40218

PHONE: (502) 459-9447 PHONE FAX: (888) 232-4583

EMAIL: INFO@NURISLAMICSCHOOL.ORG

WEBSITE: WWW.NURISLAMICSCHOOL.ORG

OFFICE HOURS 7:30AM-4:00PM

