



Grace Partnership – Credit Card Form

I want to support the ministry through automatic monthly donations and would like my funds to be sent to:
(Please choose one)

- Andrew Wommack Ministries Canada
- Charis Bible College Toronto
- Charis Bible College Calgary
- World Outreach

Please debit my bank account: \$ _____ on the 1st 15th of each month
(minimum amount: \$5.00) (check one or both)

Start Date: _____ 1st 15th _____
(month) (check only one) (year)

Your gift will be withdrawn from your chequing account on the on the day(s) specified above or the next business day.

Donor Name: _____
Please include First and Last Name, or Name of Business/Organization

Address: _____

City/Town: _____

Province: _____ Postal Code: _____

Email: _____

Signature: _____

Signature of joint account holder (If any): _____

Telephone: _____ Date: _____

Receipt Preference: Year-End Consolidated None

Upon completion, please return this form to the Canadian office of AWMC:

1. Scan and email to info@awmc.ca
2. Mail to:

Andrew Wommack Ministries Canada
300 Steeprock Drive
Toronto ON M3J 2X1

If sending by mail, please allow 10 business days for the initial processing of your request.

You may also set up an automatic monthly Grace Partnership online.
Visit www.awmc.ca.

CREDIT CARD PAYMENT INFORMATION

Name as It Appears on Card: _____

Credit Card #: _____

Expiration Date: ____ / ____ MasterCard VISA Credit/Debit

Signature of Cardholder: _____ Date: _____

The office of Andrew Wommack Ministries Canada (AWMC) keeps your personal information STRICTLY PRIVATE AND CONFIDENTIAL. Donations are tax-deductible in accordance with Canada Revenue Agency (CRA) regulations. This authorization is to remain in effect until AWMC has received notification from you of its termination in such time and in such manner as to afford AWMC a reasonable opportunity to act on it.