



# Andrew Wommack Ministries Canada

## Grace Partnership – Credit Card Form

**I want to support ANDREW WOMMACK MINISTRIES CANADA through automatic monthly donations.**

**Please charge my credit card:** \$ \_\_\_\_\_ on the  1<sup>st</sup>  15<sup>th</sup> of each month  
*(minimum amount: \$5.00) (check one or both)*

**Start Date:** \_\_\_\_\_  1<sup>st</sup>  15<sup>th</sup> \_\_\_\_\_  
*(month) (check only one) (year)*

Your gift will be automatically charged to your credit card 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: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: \_\_\_\_\_

Receipt Preference:  Consolidate Year End  None

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

1. Scan and email to [info@awmc.ca](mailto: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](http://www.awmc.ca).**

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.

### CREDIT CARD PAYMENT INFORMATION

Name as It Appears on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_ / \_\_\_\_  MasterCard  VISA Credit/Debit

Signature of Cardholder: \_\_\_\_\_

Date Form Signed by Cardholder: \_\_\_\_\_