

**Direct Deposit Authorization Form**

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| **Your Information**  *Please print clearly in block-style text.* |  |  |
| *Your Name* |  | *Email Address Please add me to the Unity email list.* |
| *Street Address New address* |  | *City State Zip* |

Effective (date)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, I commit $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ monthly to Unity of Fairfax through either an automatic charge to my credit/debit card or Electronic Funds Transfer (EFT). If I choose EFT authorization, I am including a voided check to enable processing. I understand that this authorization will remain in full force and effect on an***on-going recurring*** ***basis until I provide written instructions*** to change or cancel this arrangement, either mailed to Unity of Fairfax, 2854 Hunter Mill Road, Oakton, VA 22124, or emailed to [accountant@unityoffairfax.org](mailto:accountant@unityoffairfax.org).

**EFTs are processed on the 10th.  CREDIT CARDs on the 15th each month.** Check this box to confirm.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **EFT:** |  | | |  | | **Credit/Debit Card:** | | |
|  | *Bank Name* | | |  | |  | | |
| *Monthly Amount for Transfer (Recurring)* | | | |  |  | *Monthly Amount for Transfer (Recurring)*  AMEX MC VISA DISCOVER | | |
| *Bank Account Number Checking Savings* | | | |  |  |  | | |
| *ABA Routing Number* | | | |  |  | *Card # Exp. Date* | | |
|  | *Printed name as it appears on your financial instrument* | | | | | |  |  |
|  |  |  | *Signature Date* | | | | | |

**Long Term Giving Plans**

The Mildred Park Society seeks to recognize those who have named Unity of Fairfax in their estate planning. If you are interested in learning more, please contact [accountant@unityoffairfax.org](mailto:accountant@unityoffairfax.org).

I have included Unity of Fairfax in my estate planning.

**Directions for Submitting Your Direct Deposit Commitment**

Your privacy is very important to us. We suggest submitting your Direct Deposit Form in one of the following ways to ensure confidentiality:

* Place your completed form in a sealed envelope and hand deliver to Patie Wilcox, Finance & Operations Director.
* Place your completed form in a sealed envelope and deposit in the locked box provided for these forms in the Atrium.
* Mail to the church office: Unity of Fairfax, ATTN: Patie Wilcox, 2854 Hunter Mill Road, Oakton, VA 22124.

**Thank you** for your heart-felt investment in Unity of Fairfax.