

THE CATHOLIC WOMEN'S LEAGUE OF CANADA

PRE-AUTHORIZED DEBIT PLAN

OVERVIEW

The Catholic Women's League of Canada has established a pre-authorized debit plan system to make the membership payment system more efficient. When used in conjunction with the on-line membership module, the processing time for membership will be greatly reduced. Once an on-line membership administrator has renewed members for payment, national office will be authorized to complete the renewals by automatically withdrawing the amounts due in accordance with the council paperwork and within five business days of processing.

The pre-authorized debit plan is an **optional program only**. Councils are not obligated to register and may still remit cheques in the traditional way via Canada Post or courier. Cheques will be processed on a first-come first-served basis, as is tradition.

REGISTRATION INSTRUCTIONS

1. Complete the enclosed Pre-Authorized Debit Plan form. Include two authorized signatories on the parish council operating account.
2. Remit the form to national office. A copy of the form will be registered with the parish council's financial institution.

PLEASE NOTE: The form will be considered as authorization in perpetuity and will be honoured by future council executives, until such time as written notification of termination is received.

PAYMENT INSTRUCTIONS

1. The online membership administrator will enter membership remittances using the web access code provided.
2. Once the membership administrator creates a batch for payment, an e-mail invoice will be generated and sent to national office and the membership administrator, indicating the payment amount due.
3. The membership administrator will notify the parish council treasurer of the e-mail invoice and amount due. It is recommended that this be done by way of forwarding the e-mail invoice to the treasurer.
4. The parish council treasurer will ensure that sufficient funds have been collected and deposited to cover the e-mail invoice generated.
5. National office will record and register the payment with its financial institution, to be withdrawn from the parish council's account five business days following receipt of the e-mail invoice.

FOR MORE INFORMATION

If you have any questions or wish more information about the plan, please contact Kim Scammell at (204) 927-2310 or at executivedirector@cwl.ca.

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Please complete the Pre-Authorized Debit (PAD) Plan agreement for businesses below.

The Parish Council authorizes The Catholic Women's League of Canada, (League) and the financial institution designated (or any other financial institution the Parish Council may authorize at any time) to begin deducting as per these instructions for payments from time to time, for all fees arising from the processing of annual membership fees as indicated on completed membership remittance information forms provided by the Parish Council. The League will obtain authorization for any one-time or sporadic debits by provision of an invoice e-mailed to the authorized database administrator.

This authority is to remain in effect until the League has received written notification from the Parish Council of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled at national office. The Parish Council may obtain a sample cancellation form, or more information on its right to cancel a PAD agreement at its financial institution or by visiting www.cdnpay.ca.

The League may not assign this authorization, whether directly or indirectly, by operation of law, change of control, or otherwise, without providing at least 10 days prior written notice to the Parish Council.

The Parish Council has certain recourse rights if any debit does not comply with this agreement. For example, it has the right to receive reimbursement for any PAD that is not authorized or is not consistent with the Pad Agreement. To obtain a form for a Reimbursement Claim, or for more information on recourse rights, the Parish Council may contact its financial institution or visit www.cdnpay.ca.

PLEASE PRINT

Date: _____

Parish Council Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Contact Name: _____ Telephone Number: _____

Financial Institution (FI): _____

FI Account Number: _____ FI Transit Number: _____

Address _____

City: _____ Province: _____ Postal Code: _____

Authorized Signatures: _____
