

Automatic Payment Withdraw Authorization

WordCross Media/iTickets/Christian Happenings is hereby authorized to initiate debit entries, and if necessary, credit entries for adjustment of errors. The authorization is for the account indicated below at the depository financial institution named below, hereinafter called DEPOSITORY.

I acknowledge that the origination of ACH transactions to this account must comply with the provisions of U.S. Law.

Bank Name: _____

Routing Number: _____

Account Number: _____

Name on Account: _____

Account Type (check one) CHECKING or SAVINGS

This authorization is to remain in full force and effect until Christian Happenings has received written notification from me (or the authorized signer) of its termination in such time and in such manner as to afford Christian Happenings and DEPOSITORY a reasonable opportunity to act on it.

Company: _____

Name (s): _____
(PLEASE PRINT)

Signature: _____

Date: _____

A credit card will be kept on file. In the event your account does not have adequate funds at the time of the ACH, your card will be charged. Please complete the information in the fields below.

***Note:** There is a \$25 fee for a returned ACH.

Account type: Visa MasterCard American Express Discover

Cardholder Name: _____

Account Number: _____

Expiration Date: _____

CCV (3 digit number on back of Visa, MC, Discover, 4 digits on front of AmEx): _____

Signature: _____ Date: _____