



Children's Center

A child abuse intervention center

Monthly Champion Enrollment Form

1713 Penn Lane | Oregon City, OR 97045

P: 503-655-7725 | F: 503-655-7720

www.childrenscenter.cc

Name(s) _____

Home Address _____

City, State, ZIP Code _____

Phone _____ Email _____

I (We) would like to support Children's Center with monthly contributions:

\$ _____ Total Monthly Contribution (\$5 minimum)

Please make charges on or around the 5th or 15th of the month, beginning (month/year) ____/____

I would like charges to occur until: I provide further notice or ending (month/year) ____/____

Credit Card Payment Option

I (We) hereby authorize Children's Center to initiate monthly charges to my (our) credit card in the amount listed above.

Name as reads on card _____

Type of Card: VISA MasterCard Amex Discover Expiration Date ____/____

Card Number _____ CVV _____

Electronic Funds Transfer (EFT) Payment Option

I (We) hereby authorize Children's Center to initiate monthly debit entries in the amount listed above, from the account at the financial institution named below, and authorize the institution to debit the below named account for the same. **Please attach a voided check or deposit slip to this form.**

Financial Institution _____ Type of Account: Checking Savings

9-digit routing number* _____ Account Number _____

*can be found at the bottom of your check, directly before your account number

Signature(s) required to authorize credit card or EFT option

Signature _____

Date _____

Signature _____

Date _____

Please remember:

- Keep a copy of this form for your records.
- Children's Center will provide you with a receipt annually in January for all gifts during the previous calendar year (January 1 through December 31) for your tax records.
- Giving recognition in the Annual Report will be based on fiscal year (July 1 – June 30).
- Return the signed form to: Children's Center, Development Office, Attn: Pamela White, 1713 Penn Lane, Oregon City, OR 97045.
- If you have questions, or would like to increase, decrease or cancel your monthly giving, contact Pamela White, Development Director, at 503-655-7725 x203 or pamela@childrenscenter.cc.