

Siddha Yoga Meditation Center in Philadelphia

Dakshina Pledge Form

I commit to pledge \$ _____ per month to the
Siddha Yoga Meditation Center in Philadelphia.

(Name)

(Date)

Address: _____

City: _____

Email: _____

Telephone #: _____

Select a Payment Method

- Automatic Pledge Program
 Send a check or cash each month

The Automatic Pledge Program is a convenient way to ensure that your pledges are made regularly on the same day each month (on or around the 15th). We automatically withdraw your pledge from your checking/savings account or your credit card. There is no charge for this service.

To enroll, please fill out the *Automatic Pledge Program Authorization Form* to the right. For withdrawal from a bank account please include a voided check (checking account) or a deposit/withdrawal slip (savings account). Drop the form in the center dakshina box or mail it to: **SYMC in Philadelphia; 228 Krams Ave; Philadelphia, PA 19127**

AUTOMATIC PLEDGE PROGRAM AUTHORIZATION FORM

I (we) hereby authorize SYMC Philadelphia, herein called Company, to initiate debit entries to my (our) account indicated below at the bank named on the check/ saving slip attached, herein called Depository, to debit the same to such account. This authorization is to remain in full force and effect until either Company or I (we) terminate this authorization at any time by giving 30 days written notice to the other party.

Please sign your name as it appears on your bank account or credit card account:

Signature Required

Amount of monthly pledge: \$ _____

Date: _____

From:

Bank account : __ Checking __ Savings

Bank Name: _____

Credit card : __ VISA __ MC __ Discover __ American Express;

Account #: _____

Exp. Date _____

**Please return this portion to SYMC in Philadelphia.
You must attach a voided check or a deposit/withdrawal slip to activate
the automatic pledge from a bank account. Thank you.**

Siddha Yoga Meditation Center in Philadelphia
Dakshina Pledge – Retain this portion for your records

Name: _____

Amount of monthly pledge: \$ _____

Select a Payment Method

- Automatic Pledge Program
 Send a check or cash each month

AUTOMATIC PLEDGE PROGRAM AUTHORIZATION

I (we) hereby authorize SYMC Philadelphia, herein called Company, to initiate debit entries to my (our) account indicated on the left at the bank named on the check/saving slip attached, herein called Depository, to debit the same to such account. This authorization is to remain in full force and effect until either Company or I (we) terminate this authorization at any time by giving 30 days written notice to the other party

From:

Bank account : __ Checking __ Savings

Credit card : __ VISA __ MC __ Discover __ American Express