

**SCOTIA DIRECT  
PRE-AUTHORIZED CREDIT ENROLLMENT FORM**

Please fill in and return this form to Heartbeat Ministries with an unsigned **voided** cheque (for verification purposes). Transactions will be processed on the 15<sup>th</sup> of each month.

We/I, \_\_\_\_\_  
(Your Name)

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Email Address \_\_\_\_\_

**HEREBY AUTHORIZE**

**Heartbeat Ministries  
95 Loggen Road  
Lower Sackville, N.S.  
B4E 1V8  
902-865-4714**

**TO DEBIT MY ACCOUNT**

ACCOUNT NUMBER: \_\_\_\_\_

Held at \_\_\_\_\_  
(Name of Financial Institution)

Branch Address: \_\_\_\_\_ Transit No. \_\_\_\_\_

For the purpose of: \_\_\_\_\_

Heartbeat Ministries amount: \_\_\_\_\_

Heartbeat Orphanage (Kenya) amount: \_\_\_\_\_

Charitable # 893193185RR0001

Signature \_\_\_\_\_ Date \_\_\_\_\_