

## Member Enrollment and Authorization Form

Return completed enrollment form with your commitment card.

Check the appropriate box:	Last Name		First Name		M.I.
New enrollment/authorization *	Mailing Address				1
<ul><li>☐ Change in bank account *</li><li>☐ Change in donation amount</li></ul>	City		State	Zip	
☐ Change in donation date ☐ Discontinue electronic donation	Telephone		Email	nail	
Donations/payments should be taken from:		REQUIRED:			
<ul><li>☐ Checking (attach a voided check)</li><li>☐ Savings (attach a savings deposit slip)</li></ul>		I authorize Lutheran Church of Honolulu and Vanco Services, LLC to process debit entries to my account my account. I understand this authority will remain in effect until I give reasonable notification to terminate the authorization.			
Routing Number Valid Routing # must start with 0, 1, 2, or 3		Account Holder Signature  Date			
•	, , ,	Date			
* ATTACH A VOIDED CHECK OR  Complete this section for Luthera	R SAVINGS DEPOSIT SLIP	FOR A NEW ENROLL		BANK ACCO	UNT ONLY
* ATTACH A VOIDED CHECK OR  Complete this section for Luthera  Congregation Name: Lutheran Church or	R SAVINGS DEPOSIT SLIP	FOR A NEW ENROLL  I DONATIONS  Street Address			UNT ONLY
* ATTACH A VOIDED CHECK OR  Complete this section for Luthera Congregation Name: Lutheran Church o City: Honolulu	R SAVINGS DEPOSIT SLIP  an CONGREGATION  of Honolulu	FOR A NEW ENROLL  I DONATIONS  Street Address State: HI	LMENT OR CHANGE IN s: 1730 Punahou St.	Zip: 96822	UNT ONLY
* ATTACH A VOIDED CHECK OR  Complete this section for Luthera Congregation Name: Lutheran Church o City: Honolulu Church Fund Designations:	R SAVINGS DEPOSIT SLIP  an CONGREGATION  of Honolulu  Amount Per Donation:	FOR A NEW ENROLL  I DONATIONS  Street Address State: HI  Frequency of	LMENT OR CHANGE IN s: 1730 Punahou St.  Donation: (Please check	Zip: 96822 only one)	UNT ONLY
* ATTACH A VOIDED CHECK OR  Complete this section for Luthera Congregation Name: Lutheran Church o City: Honolulu Church Fund Designations: General/Operating	R SAVINGS DEPOSIT SLIP  an CONGREGATION of Honolulu  Amount Per Donation: \$	FOR A NEW ENROLL  I DONATIONS  Street Address State: HI  Frequency of  Monthly o	Example 2 to 2 t	Zip: 96822 only one)	UNT ONLY
* ATTACH A VOIDED CHECK OR  Complete this section for Luthera Congregation Name: Lutheran Church o City: Honolulu Church Fund Designations:	R SAVINGS DEPOSIT SLIP  an CONGREGATION of Honolulu  Amount Per Donation:  \$\$	FOR A NEW ENROLL  I DONATIONS  Street Address State: HI  Frequency of  Monthly o	s: 1730 Punahou St.  Donation: (Please check on the	Zip: 96822 only one)	UNT ONLY
* ATTACH A VOIDED CHECK OR  Complete this section for Luthera Congregation Name: Lutheran Church o City: Honolulu Church Fund Designations: General/Operating	Amount Per Donation:  \$	FOR A NEW ENROLL  I DONATIONS  Street Address State: HI  Frequency of  Monthly o  Weekly or  Bi-weekly	s: 1730 Punahou St.  Donation: (Please check on the	Zip: 96822 only one)	UNT ONLY
* ATTACH A VOIDED CHECK OR  Complete this section for Luthera Congregation Name: Lutheran Church o City: Honolulu Church Fund Designations:	Amount Per Donation:  \$	FOR A NEW ENROLL  I DONATIONS  Street Address State: HI  Frequency of  Monthly o	s: 1730 Punahou St.  Donation: (Please check on the	Zip: 96822 only one)	UNT ONLY
* ATTACH A VOIDED CHECK OR  Complete this section for Luthera Congregation Name: Lutheran Church o City: Honolulu Church Fund Designations: General/Operating	Amount Per Donation:  \$	FOR A NEW ENROLL  I DONATIONS  Street Address State: HI  Frequency of  Monthly o  Weekly or  Bi-weekly  One Time	s: 1730 Punahou St.  Donation: (Please check on the	Zip: 96822 only one)	UNT ONLY
* ATTACH A VOIDED CHECK OR  Complete this section for Luthera Congregation Name: Lutheran Church o City: Honolulu Church Fund Designations:	Amount Per Donation:  \$ \$	FOR A NEW ENROLL  I DONATIONS  Street Address State: HI  Frequency of  Monthly o  Weekly or  Bi-weekly  One Time  m \$5)  Date of First Do	Example 2 to 1730 Punahou St.  Donation: (Please check on the	Zip: 96822 only one)	UNT ONLY

## **ENROLLMENT INSTRUCTIONS:**

- 1. Using black ink, complete the personal information section including name, address and telephone numbers.
- 2. Indicate whether this is a new enrollment/authorization, a change in amount, or a change in bank account.
- 3. Indicate the account type, routing number and account number. Attach a voided check or savings deposit slip to the enrollment form for a new enrollment or change in bank account.
- 4. Sign and date the Account Holder Signature section.
- 5. Complete the appropriate section with the institution name and address that will benefit from your giving. For Your Lutheran Congregation Offering:
  - Designate which fund(s) your donation should go to and the amount.
  - · Select the frequency of your offering.
- 6. Return the completed enrollment form to the Lutheran congregation, school or institution benefiting from your giving.

**PRIVACY / CONFIDENTIALITY:** This Authorization Form is seen by the nonprofit Lutheran organizations enrolled in Simply Giving<sup>®</sup> as well as by the Vanco Services employees who process it. In addition, participant name and address information may be provided to Thrivent Financial for Lutherans. Participant information will not be shared with any other organizations.