

EARLY CHILDHOOD EDUCATORS OF BRITISH COLUMBIA

PRE-AUTHORIZED PAYMENT AGREEMENT FORM

Membership Category

<input type="checkbox"/> New Full \$115 (10.75 monthly) HST \$13.80 TOTAL \$128.80	<input type="checkbox"/> Renew Full \$110 (10.27 monthly) HST \$13.20 TOTAL \$123.20
<input type="checkbox"/> New Student \$95 (8.87 monthly) HST \$ 11.40 TOTAL \$106.40	<input type="checkbox"/> Renew Student \$90 (8.40 monthly) HST \$10.80 TOTAL \$100.80
<input type="checkbox"/> New Associate \$100 (9.35 monthly) HST \$12.00 TOTAL \$112.00	<input type="checkbox"/> Renew Associate \$95 (8.87 monthly) HST \$11.40 TOTAL \$106.40

HST #107272791 RT0001

I, (name) _____,
hereby authorize the Early Childhood Educators of British Columbia to debit my bank
account # _____ at Branch # _____
at (name of the Financial Institution) _____
for the amount of _____ on the **1st or 15th** (*circle one only*) day of each
month.

This authorization is for the period of **one year only** from

_____ to _____
(e.g. April 1, 2010 to March 1, 2011)

Member signature

Date

Please tape a void cheque (Do not staple)

Return to ECEBC
2774 East Broadway, Vancouver, BC V5M 1Y8
Fax (604) 709-6077