

Account Pre-Authorized Payment

New enrollment	Change in authorization	Cancellation of authorization as of	
1. Cardholder Informati	on (Please print clearly)		Month / Day / Year
1. Cardifolder informati	on (Flease print clearly)		
Name:			
Mailing Address:			
City:	Province	e / State: Postal Code:	
Telephone Number:			
2. Purchases Category	(Check one)		
Personal Purchases	Business Purchas	es	
3. Pre-Authorized Credi	t (PAC) Account Informati	ion	
Co-op Member Number:		Located on your monthly billing statement to Note: Do not include any zeros preceding yo Example: 0646 0 009999 7 Member num	our account number
Credit Card Number:			
Expiry Date:	MM/YY CV	/V / CSC:	
Credit Card Type:	Visa	Mastercard An	nerican Express
have the meanings set out all amounts owed to us on	in the Pre-Authorized Credithe last day of the month (ing month). You have read, u	older of the PAC account who signs the Agreement. You authorize us to charge purchases made in one calendar month understand and agree to the the terms of	the PAC account for are payable in full by
Signature of card holder		Date (Month / Day / Year)	
Name (Please print)			
When this form is complete, mail, email, or fax to:		Dawson Co-operative Union Attention: Accounts Receivable 110-10200 8th Street Dawson Creek, BC V1G 3P8 Fax: 250-782-6017	

If you have any questions or need assistance completing this form, please call us at (250) 782-4858

Pre-Authorized Debit Agreement

- 1. In this Authorization "I", "we", "my", "our", "me", and "us" refers to the Customer(s) indicated on the "Account Pre-Authorized Payment" Form attached hereof. The Dawson Co-operative Union will be referred to as the Dawson Co-op going forward.
- 2. I/we authorize the Dawson Co-op to begin deductions as per my/our instructions for monthly regular recurring payments and/or one-time payments from time to time, for payment of all charges under my/our Dawson Co-op account(s). Regular monthly payments for the full amount of purchases / services rendered will be charged to my/our specific account on the last day of each month following the purchase date. The Dawson Co-op will provide ten (10) days written notice of the amount of each regular charge by way of my/our monthly statement. The Dawson Co-op will obtain my/our authorization for one-time or sporadic charges.
- 3. It is my/our responsibility to ensure that sufficient credit is available on the credit card for any payment. The Dawson Co-op will reverse the payment to my/our Member Account if it is declined or dishonoured for any reason. I/We agree that the Dawson Co-op may charge the credit card on the payment due date as set out in and described in my/our monthly statement. Dishonoured payments will be resubmitted five (5) business days following the first attempt. Failure to pay the account balance in full by the original due date will result in interest being charged as per the Credit Agreement.
- **4.** This authority is to remain in effect until the Dawson Co-op has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled via postal mail, email, or facsimile. I/We may obtain a cancellation form from the Dawson Co-op administration department or by visiting www.payments.ca.
- **5.** The Dawson Co-op may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least ten (10) days prior written notice to me/us.
- **6.** I/We have certain recourse rights if any charge does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAC that is not authorized or is not consistent with this PAC Agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our credit card provider or visit www.payments.ca.
- 7. I/We consent to the collection of any personal information that may be contained on the Form and in the records held by the Dawson Co-op and to the disclosure of such personal information to Moneris and the financial institution at which the Dawson Co-op maintains the account to be credited in order to process payments and as necessary for the proper application of the Rules. The Dawson Co-op may provide me/us with communications about the services by email, or other electronic method. For example, the Dawson Co-op may send confirmation of enrolment, cancellation, suspension or changes to the services by email.
- 8. To the extent permitted by applicable law, the Dawson Co-op shall not be liable to me/us or any third party of any incidental, indirect, consequential, special, punitive or exemplary damages of any kind whatsoever arising from or in connection with this Agreement including without limitation a pre-authorized payment or a debit from credit card account (whether in contract, tort, strict liability, products liability, or otherwise), including without limitation, lost revenues, loss of profits or loss or interruption of business. This provision shall survive termination of this Agreement. I/We agree not to use these services for any illegal or abusive purpose or in any way which damanges, interferes with or disrupts these services or any property of ours or a third party. I/We agree to immediately notify the Dawson Co-op of any use of these services that is illegal, unauthorized, fraudulent or prohibited by this Agreement. The Dawson Co-op has made no warranty that these services will meet my/our requirements, be uninterrupted, timely or error free. Any use of these services is done at my/our own risk and I/we are solely responsible for any damages in the event that I/we are unable to make a payment, a payment is late, or the Dawson Co-op does not receive my/our payment.

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My signature below verifies that I/we have read	I and agree to the Terms as set out in the Agreement above.
Signature of card holder	Date (Month / Day / Year)
Name (Please print)	-