Tel Hai Development, Inc. – Payment Authorization Form

☐ One-Time Charge	□ Monthly	y Charge – Initial Au	ıthorization	☐ Chan	ge – Monthly Charge	
I hereby authorize	Tel Hai De	velopment, Inc. to	charge \$		from my:	
□ Credit Card Please Select One:	□Visa	■MasterCard	□Discover	□A	MEX	
Credit Card Number: _						
Exp. Date:	Security Code:					
□ Direct Debit (Ple	ease Attach a	VOID Check)				
Please Select One:	Checking	Savings				
Financial Institution: _		Addre	ss:			
Account Number:		Routin	g Number:			
□ Resident Accou	nt					
Beginning Date) :	Ending Date	(if applicable):			
Please direct my gifts in						
			(D			
☐ □ Care Assurance Fund □ □ Good Samaritan Fund			r (Restricted) stricted (Where it			
Signature			Date			
~1 g		T the following inform				
DONOR NAME	Please PKIN	T the following inform	nation for your ac	count.		
DONOR NAMEFirst		Middle In	tial	Las	st	
ADDRESS						
		City		State	Zip Code	
Telephone #		E-mail				
Tel Hai Development, Inc. is a registered registration and financial information med does not imply endorsement.						
For Office Use Only	: D	lease return this form on	d inquires to:			
■ Development Office		Please return this form and inquires to: Tel Hai Development Office PO Box 190				
Taken to Finance Office _		Honey Brook, PA 19344 telhaidevelopment@telhai.org				

610-273-9333 x. 2039