

AUTHORIZATION AGREEMENT FOR FINANCIAL ASSISTANCE TO ALABAMA CHRISTIAN YOUTH CAMP

I (We) hereby authorize Alabama Christian Youth Camp, Inc. FID 63-0875316 hereinafter called COMPANY to initiate debit entries to my (our)

Checking Savings (Select one)

Account indicated below and the depository financial institution named below, hereinafter called DEPOSITORY, to debit the same to such account.

_____	_____	_____	_____
Financial Institution Name	City	State	Zip Code
_____	_____		
Routing Number	Account Number		

Please attach a voided Check on the above account in order that we may verify the numbers provided above.

This authority is to remain in full force and effect until COMPANY has received **written** notification from me (or either of us) of its termination in such time and in such manner as to allow COMPANY and DEPOSITORY a reasonable opportunity to act on it.

_____	_____
NAME (S) ON ACCOUNT (PRINT)	CUSTOMER ID NUMBER (IF ANY)

_____	_____	_____
Date	Signature	Signature

AMOUNT TO DEBIT EACH MONTH _____

Please return to:
Alabama Christian Youth Camp, Inc.
768 Camp Ney A Ti Rd.
Guntersville, AL. 35976