



THE UNITED CHURCH OF CANADA  
BENEFITS CENTRE  
3250 Bloor Street West, Suite 200  
Toronto, Ontario M8X 2Y4  
Tel: 1-855-647-8222

**THE UNITED CHURCH OF CANADA  
BENEFITS AND PENSION PLANS  
Pre-Authorized Debit (PAD) Agreement – Employers**

<b>1. Employer Information “Payer” (Please Print Clearly)</b>
Name of the Employer
Employer Number
Benefit Centre Code
Mailing Address
City
Province
Postal Code
Contact Person’s Name
Telephone Number
Email address
<b>2. Payer Financial Institution Account Information Please Provide “VOID” Cheque or complete the below information</b>
Deposit Account Number
Branch Transit Number
Financial Institution Number
Financial Institution Name
Branch Address
<b>3. Pre-Authorized Debit (PAD) Details</b>
<b>You the Payer authorize The United Church of Canada Benefits Centre to debit the financial institution account for a stated amount invoiced each month to maintain Benefits coverage for your Employees.</b>
You the Payer may revoke your authorization at any time, subject to providing 30 days’ notice. To obtain a sample cancellation form, or for more information on your right to cancel this PAD Agreement, contact your financial institution or visit <a href="http://www.cdnpay.ca">www.cdnpay.ca</a> .
Signature of Account Holder (Payer)
Name (Please Print)
Date
Signature of Joint Account Holder (if appropriate)
Name (Please Print)
Date

You have certain recourse rights if any debit does not comply with this PAD Agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on your recourse rights, contact your financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).

The completed PAD Agreement should be sent by mail, email or fax to: The United Church of Canada Benefits Centre, 3250 Bloor Street West, Suite 200, Toronto, Ontario, M8X 2Y4 Tel: 1-855-647-8222 Email: [benefits@united-church.ca](mailto:benefits@united-church.ca).