



CONSUMER DEBIT AUTHORIZATION

Direct Payment Enrollment for Recurring Donation to the Big Green Scholarship Foundation

Date of Donation _____

Name _____

Home Address _____

City/State/Zip _____

Contact Phone _____

Please deduct my direct donation from my account as follows:

Name of Financial Institution _____

Financial Institution Routing Number _____

Withdrawal Date (check one) 5th of the month 20th of the month

Type of Account:

Checking Account # _____

Savings Account # _____

I authorize the Big Green Scholarship Foundation to deduct my recurring donation from the account listed above. I understand that if I make changes or close the account, **it is my responsibility** to notify the Big Green by contacting them at the address below:

Big Green Scholarship Foundation
Post Office Box 1360
Huntington, WV25715
304-696-4661

Signature _____ Date _____

→ IMPORTANT -- A completed Big Green Renewal form (pledge card) **and** a voided check or savings deposit slip must accompany this form.