

## Automatic Giving Enrollment Form 1

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_

### Option 1 – Automatic Bank Account Draft

I, \_\_\_\_\_, authorize  
Trans World Radio to charge my bank account  
listed below on the  10th  25th starting  
on the \_\_\_\_\_ for the amount of  
\$ \_\_\_\_\_ and for \_\_\_\_\_  
(month, day, year) (designation/purpose)

My account information is as follows:

Customer's name (as it appears on bank account):  
\_\_\_\_\_

Bank name: \_\_\_\_\_

Bank account type:

checking  savings  business checking

Bank ABA routing number: \_\_\_\_\_

Bank account number:  
\_\_\_\_\_  
\_\_\_\_\_

Customer signature \_\_\_\_\_ Date \_\_\_\_\_

**Email address (required for gift acknowledgements)**  
\_\_\_\_\_

This payment authorization is valid and to remain in  
effect unless I, \_\_\_\_\_, notify  
Trans World Radio of its cancellation in writing.

Simply complete, detach and send to:  
**TWR Donor Services, P.O. Box 8700,  
Cary, NC 27512-8700**

## Automatic Giving Enrollment Form 2

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_

### Option 2 – Automatic Credit/Debit Card Charge

I, \_\_\_\_\_, authorize  
Trans World Radio to charge my credit/debit-card  
account listed below on the  10th  25th starting  
on the \_\_\_\_\_ for the amount of  
\$ \_\_\_\_\_ for \_\_\_\_\_  
(month, day, year) (designation/purpose)

Print cardholder's name as it appears on card  
\_\_\_\_\_

Cardholder's signature  
\_\_\_\_\_

Card number  
\_\_\_\_\_

Expiration date \_\_\_\_\_

Security Code \_\_\_\_\_

**Email address (required for gift acknowledgements)**  
\_\_\_\_\_

This payment authorization is valid and to remain in  
effect unless I, \_\_\_\_\_,  
notify Trans World Radio of its cancellation in writing.

Simply complete, detach and send to:  
**TWR Donor Services, P.O. Box 8700,  
Cary, NC 27512-8700**

