

The Bridge International, Inc.
Check Free
Electronic Funds Transfer Form

I would like to participate in The Bridge International's global ministry

Name: _____

Address: _____

City / State / Zip: _____

Telephone: _____

Email: _____

I, _____ authorize my bank to make
monthly donations by Electronic Funds Transfer and post it to my bank account.

Bank Name: _____

Address: _____

City / State / Zip: _____

Donation Amount: _____ Allocation: _____

I understand I am in full control of my payment, and if at any time I decide to
make any changes or discontinue the EFT service, I will call or write The Bridge
International. I also understand that the EFT is scheduled on the 20th of each
month.

Donor's Signature: _____ Date: _____

I HAVE ATTACHED MY VOIDED CHECK

Staple Here

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Website: www.bridgeinternational.org