



**Please mail to:**

**Blue Haven Youth Camp, Inc.**

**Treasurer**

**P.O. Box 92156**

**Southlake, Texas 76092**

**OR**

**Fax to David at 1 800.520.3274**

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**AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT DONATIONS (ACH DEBITS)  
TO BLUE HAVEN YOUTH CAMP, INC.**

I (we) \_\_\_\_\_ hereby authorize Camp Blue Haven, hereinafter called CBH, to initiate debit entries to my (our) bank  Checking /  Savings (check one) account indicated below, and to debit the same such account each month beginning on (month) \_\_\_\_\_ 15<sup>th</sup>, 20\_\_ in the amount of one of the following:

\$10    \$20    \$30    \$40    \$50    \$75    \$100    Other \$ \_\_\_\_\_.

Please attach a voided check or provide the following information.

Routing  
Number \_\_\_\_\_

Account  
Number \_\_\_\_\_

This authorization is to remain in full force and effect until CBH has received written notification from me (or either of us) of its termination in such time and such manner as to afford CBH and the First State Bank opportunity to act on it. I (we) acknowledge that the origination of ACH transaction to my (our) account must comply with the provisions of U.S. law.

NAME \_\_\_\_\_  
(please print)

PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

EMAIL \_\_\_\_\_

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_