



Louix Dor Dempriey™  
FOUNDATION

## Monthly Giving Program Enrollment Form Credit Card Automatic Charge Authorization

Please complete the following (*please print clearly*):

\_\_\_\_\_ This is my first time enrolling in the Louix Dor Dempriey Foundation Monthly Giving program

\_\_\_\_\_ I have participated in the Louix Dor Dempriey Foundation Monthly Giving Program in the past

As my financial gift to the Louix Dor Dempriey Foundation, and in lieu of my credit/debit card imprint,

I \_\_\_\_\_  
(*print name as it appears on your card*)

hereby authorize the Louix Dor Dempriey Foundation to initiate a monthly charge to my \_\_\_\_\_ Visa / Master Card  
(*Please circle*)

Card number: \_\_\_\_\_ Exp. date: \_\_\_\_ / \_\_\_\_ (mm/yyyy)

3-digit security number on back of card: \_\_\_\_\_

Amount to charge: \_\_\_\_\_ Process my charges beginning on: \_\_\_\_\_

*Note: Processing of the first charge will take effect a minimum of five (5) business days after above date.  
Your donation will be processed each month on the above date.*

Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

This authority is to remain in full force and effect until the Louix Dor Dempriey Foundation has received written notification from me of its termination. I understand that the notice of termination needs to be received by the Foundation **at least five (5) business days prior to the next scheduled transaction** in order to provide the Louix Dor Dempriey Foundation a reasonable opportunity to put the termination into effect.

If you have any questions about donating online, please e-mail us at [donations@Louix.org](mailto:donations@Louix.org) or call us at (888) 288-3735.

By signing below, I acknowledge the charges described on this form. Payment in full is to be made when billed, or in extended payments in accordance with the standard policy of the company issuing the credit card.

### Executed by:

\_\_\_\_\_ [Legal Name]

\_\_\_\_\_ [Signature]

\_\_\_\_\_ [Date]

### Please return this form to:

Louix Dor Dempriey Foundation  
24100 El Toro Road, Ste. D-321  
Laguna Woods, CA 92637 U.S.A.

Fax: (949) 269-0113

The Louix Dor Dempriey Foundation is a non-profit educational organization.  
All contributions are tax deductible to the fullest extent allowed by law.

*We are deeply grateful for your support of the Louix Dor Dempriey Foundation.*