



In the name of ALLAH, most gracious most merciful

AL AMIN CENTER OF FLORIDA

8101 S Military Trail, Boynton Beach, FL 33436. Phone- (561) 292 3209

Email: info@alamincenter.comcastbiz.net

Facebook page - www.facebook.com/alamincenterflorida



Automatic Contribution Form

Note: This form is to sign-up for automatic donations (ONLY) to the AL AMIN CENTER OF FLORIDA from your authorized payment options. Please fill up each section of this form completely.

Section 1: Designation

- Withdrawal Interval (please circle one) - Once / Weekly / Monthly / Quarterly / Yearly
- Withdrawal day/date (i.e. 8th of each month) - _____
- Pledged amount : \$30 \$50 \$100 \$200 \$500 other _____

Section 2: Payment options: (please choose one)

Credit Card Only

Credit Card Type : MasterCard(MC) Visa(VS) Discover Card(DC) American Express

Card Number: _____

Expiration Month: _____ Expiration Year: _____

CVV2 Code: _____ (right 3 digit numbers on back of VS/MC/DC & 4 digit numbers in front of American Express)

Checking/ Savings Account Only (please fill up or attach a voided check)

Account Type (please check): Checking Savings

Name of Bank/Financial Institution _____

Name on Account _____

Account # _____ Routing # _____

Section 3: Donor Contact Information / Billing Address for credit card payment

First Name:	Last Name:
Address:	City:
State:	Zip code:
Phone #	Email -

I, _____, authorize Al Amin Center of Florida to withdraw the above
(full name)
pledged amount in a noted period from my selected account type to the masjid general fund.

I understand that this authorization will be in effect until I notify Al Amin Center of Florida by writing an email to info@alamincenter.comcastbiz.net that I no longer desire to continue, allowing it at least 2 weeks' time to act on that notificatio

(Donor signature)

Date