

# Registration Form



**FINANCIAL.**

That's just good banking.

## President's Choice Financial® MasterCard® Pre-Authorized Debit (PAD) Payment Service Agreement (Personal)

- Please complete all sections in order to instruct your financial institution to make payments to your PC MasterCard directly from your bank account.
- Please read the Authorization terms below, complete and sign this form, and return it to us by mail, email, or fax to:

P.O. Box 4403  
Station A  
Toronto, Ontario  
M5W 5Y4  
Email: documents@pcmastercard.ca  
Fax: 1 866 437 6576

- If you have any questions, please contact our customer service line at 1 866 246 7262 (the number on the back of your credit card) 24 hours a day, 7 days a week.

This Pre-Authorized Debit (PAD) Payment Service Agreement (Personal) will take effect on your next payment due date provided that we receive the completed and signed form at least 10 business days before the next payment due date.

Please indicate the following by checking the appropriate box:

New PAD Request  Update Pre-existing PAD

- To change any of your bank account information, you must complete and resubmit a new Pre-Authorized Debit (PAD) Payment Service Agreement (Personal) form in accordance with the terms set forth.
- You have certain recourse rights if any debit transaction does not comply with this Authorization. For example, you have the right to receive reimbursement for any debit transaction that is not authorized or is not consistent with this Authorization. To obtain more information on your recourse rights, please contact your financial institution or visit [cdnpay.ca](http://cdnpay.ca).
- You may cancel your Authorization of the Pre-Authorized Debit (PAD) Payment Service Agreement (Personal) at any time subject to providing us with 30 days' prior notice from the next payment due date. You must provide us this notice in writing by completing the PAD Cancellation form. To obtain a copy of the PAD Cancellation form, please visit our website at [pcfinancial.ca/pad](http://pcfinancial.ca/pad), and for more information on your rights to cancel the Pre-Authorized Debit (PAD) Payment Service, please contact your financial institution or visit [cdnpay.ca](http://cdnpay.ca).

### 1. President's Choice Financial MasterCard Primary Cardholder Information (please print clearly)

First Name: \_\_\_\_\_ Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

President's Choice Financial MasterCard Card Number:

Street Number: \_\_\_\_\_ Street Name: \_\_\_\_\_

Unit Number: \_\_\_\_\_ Rural Route (R.R.) Number: \_\_\_\_\_ Post Office Box: \_\_\_\_\_

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Telephone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_ Business Telephone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_

### 2. Primary Cardholder's Bank Account Information (please print clearly)

Transit #:  Bank ID:  Bank Account Number:

Chequing  Savings

Financial Institution: Name: \_\_\_\_\_ Branch Address: \_\_\_\_\_

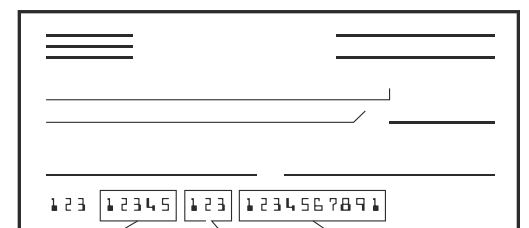
### 3. Timing and Amount

You authorize us to process pre-authorized debits against the bank account from the financial institution identified above each month as indicated on your monthly statement. The payment option you choose below will be withdrawn on the due date indicated on your monthly statement, less any amounts paid by you before the payment due date.

Please check one of the following payment options:

Minimum Payment Due  Full Statement Balance

#### Where to find this information



TRANSIT NUMBER  
(5 DIGITS)

BANK ID  
(3 DIGITS)

ACCOUNT  
NUMBER

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## President's Choice Financial® MasterCard® Pre-Authorized Debit (PAD) Payment Service Agreement (Personal)

### 4. Authorization to Debit Bank Account

In this Authorization form, “we,” “us,” and “our” mean President's Choice Bank (as issuer of President's Choice Financial MasterCard) and “you” and “your” mean each holder of the bank account indicated on this form and the primary account holder of the President's Choice Financial MasterCard, as applicable. By signing below, you authorize us to debit your bank account for the purpose of paying your President's Choice Financial MasterCard account identified above. You warrant and guarantee that you have provided us with all relevant information in respect of your bank account and that all persons required to sign on behalf of the bank account have signed this Authorization. **You agree to waive the 10-day pre-notification requirement for pre-authorized debits and for changes to the amount or payment date of those debits, as set out in the rules of the Canadian Payments Association.**

You understand that this Authorization applies only to the method of payment under your President's Choice Financial MasterCard account and does not otherwise affect your obligations to us. Cancellation of this Authorization does not relieve you of any obligation that you have to President's Choice Bank for your President's Choice Financial MasterCard. This includes any obligation to pay all amounts owing to us by a method of payment that is satisfactory to us. **This Authorization will terminate if any two consecutive pre-authorized debit payments are returned to us as dishonoured payments and you agree to pay us any applicable fees.** It is your responsibility to ensure that sufficient funds are available in your bank account for any payment. Please note: Your payment will be applied to your account on the due date; however, it may not be reflected in your available credit until the payment has cleared your bank account. The payment will clear in seven business days.

\_\_\_\_\_  
Signature of Bank Account Holder (Primary cardholder)

\_\_\_\_\_  
Signature of Joint Bank Account Holder (if applicable)

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Date (dd/mm/yyyy)

\_\_\_\_\_  
Date (dd/mm/yyyy)

**If you would like an email to confirm that we have received and actioned this form, please provide the email address of the primary cardholder here:**

\_\_\_\_\_

**Check here if you would like us to update your account with this email address. You may receive commercial electronic messages such as email from President's Choice Bank. You may later unsubscribe. You may contact President's Choice Bank at P.O. Box 4403, Station A, Toronto, ON, M5W 5Y4, or at [talktous@pcmastercard.pcfincial.ca](mailto:talktous@pcmastercard.pcfincial.ca).**