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**MEMBERSHIP RENEWAL INVOICE**

|             |  |
|-------------|--|
| Invoice No. |  |
| Date        |  |
| Member ID   |  |

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**MEMBER INFORMATION**

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**MEMBERSHIP DETAILS**

| Description       | Renewal Period | Amount |
|-------------------|----------------|--------|
|                   |                |        |
|                   |                |        |
| Total Amount Due: |                |        |

**PRE-AUTHORIZED DEBIT (PAD) AGREEMENT**

I/We authorize the organization named above to debit my/our account indicated below for the purpose of membership renewal fees. These debits will occur in accordance with the billing cycle specified in the membership terms. I/We understand that this authority is to remain in effect until written notification of its change or termination is received at least 30 days prior to the next scheduled debit.

BANK NAME

TRANSIT NUMBER (5 DIGITS)

FINANCIAL INST. NO. (3 DIGITS)

ACCOUNT NUMBER

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Authorized Signature

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Date