

**FOR 2022, PDA IS OFFERING A ONE-TIME \$50 INCENTIVE FOR NEW EDUES ENROLLEES.**

## **CREDIT/DEBIT CARD eDUES ENROLLMENT AGREEMENT**

**PDA IS PLEASED TO ANNOUNCE A CREDIT/DEBIT CARD OPTION FOR THE eDUES PROGRAM.** The program will automatically debit your membership dues from your designated card in 12 equal installments from January through December of the current year, 2022. Members can sign up to participate in electronic payments for the current dues year in any month except December. The eDues program provides an incremental, hassle free method for maintaining membership.

I (we) hereby authorize the Pennsylvania Dental Association to charge entries to the credit or debit card indicated below.			
<input type="checkbox"/> Visa	<input type="checkbox"/> American Express	Indicate Personal or Corporate credit card:	
<input type="checkbox"/> MasterCard	<input type="checkbox"/> Discover	<input type="checkbox"/> Personal	<input type="checkbox"/> Corporate

Credit Card Number:	Credit Card Expiration Date:
Debit Card Number:	Debit Card Expiration Date:

### **PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS.**

*This authority is to remain in full force and effect until the Pennsylvania Dental Association has received written notification from me (or either of us) of its termination in such time and manner as to afford the Pennsylvania Dental Association and FINANCIAL INSTITUTION a reasonable opportunity to act on it. PDA will issue a refund to members who withdraw from the eDues program and want to terminate membership if written notice is received before March 31. After the March 31 deadline, any unallocated dues already collected on the member's behalf will be recognized as PDA dues revenue.*

\_\_\_\_\_ (Print Individual Name)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (ADA Number)

\_\_\_\_\_ (Date)

**PLEASE FAX COMPLETED ENROLLMENT AGREEMENT TO PDA AT (717) 232-7169.**

## **BANK ACCOUNT (ACH) eDUES ENROLLMENT AGREEMENT**

**PDA WILL CONTINUE TO OFFER THE eDUES PROGRAM FOR BANK ACCOUNTS.** The program will automatically debit your membership dues from your designated bank account in 12 equal installments from January through December of the current year, 2022. Members can sign up to participate in electronic payments for the current dues year in any month except December. The eDues program provides an incremental, hassle free method for maintaining membership.

I (we) hereby authorize the Pennsylvania Dental Association to debit entries to the account and financial institution indicated below.		
Indicate Personal or Corporate Account:	<input type="checkbox"/> Personal	<input type="checkbox"/> Corporate
_____ (Financial Institution Name)	_____ (Routing Number)	_____ (Account Number)
Type of Account: _____ Checking _____ Savings		

### **PLEASE ATTACH A COPY OF A VOIDED CHECK TO THE BANK ACCOUNT DEBIT ENROLLMENT FORM.**

### **PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS.**

*This authority is to remain in full force and effect until the Pennsylvania Dental Association has received written notification from me (or either of us) of its termination in such time and manner as to afford the Pennsylvania Dental Association and FINANCIAL INSTITUTION a reasonable opportunity to act on it. PDA will issue a refund to members who withdraw from the eDues program and want to terminate membership if written notice is received before March 31. After the March 31 deadline, any unallocated dues already collected on the member's behalf will be recognized as PDA dues revenue.*

\_\_\_\_\_ (Print Individual Name)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (ADA Number)

\_\_\_\_\_ (Date)

**PLEASE FAX COMPLETED ENROLLMENT AGREEMENT TO PDA AT (717) 232-7169.**