



# AUTHORIZATION TO ADD OR REMOVE ADVISORS

I, (giver name) \_\_\_\_\_ of  
(Fund name) The \_\_\_\_\_ Fund,  
Fund # \_\_\_\_\_ authorize National Christian Foundation to:

Select one:

- Add (release information, including current, historical data & transactions into & out of the Fund)
- Remove (terminate all access & all rights to the Fund)

1. Name & Title: \_\_\_\_\_ Company (if applicable): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Fund Role:  Fund Holder  Spouse  Fund Participant  Financial Advisor  Attorney  
 Accountant  Company Representative or Colleague

Level of Access:  Full Access: Can act on behalf of giver  Advisor: Recommend grants  Reviewer: Read only access

Please note: Anyone with Full or Advisor access must be at least 18 years of age.

Select one:

- Add (release information, including current, historical data & transactions into & out of the Fund)
- Remove (terminate all access & all rights to the Fund)

2. Name & Title: \_\_\_\_\_ Company (if applicable): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Fund Role:  Fund Holder  Spouse  Fund Participant  Financial Advisor  Attorney  
 Accountant  Company Representative or Colleague

Level of Access:  Full Access: Can act on behalf of giver  Advisor: Recommend grants  Reviewer: Read only access

Please note: Anyone with Full or Advisor access must be at least 18 years of age.

This authorization is effective until I/we notify you otherwise.

\_\_\_\_\_  
Primary Fund Holder Signature (Required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Additional Fund Holder Signature (Required)

\_\_\_\_\_  
Date