



'IT IS IN GIVING THAT WE RECEIVE'



ST MONICA'S THANKS GIVING CONTRIBUTIONS ADVICE FORM

FAMILY SURNAME : _____

ADDRESS : _____

ADDRESS : _____ POSTCODE: _____

PHONE : HM _____ WK _____ MOBILE _____



EMAIL : Mr : _____ Mrs/Ms _____

Christian Names	Religion	Date of Birth	Occupation
Mr			
Mrs			
Or Ms			
Children at Home		Date of Birth	School or Occupation

OPTION 1 - MY "CASH" PLEDGE IS \$ _____ (PLEASE CIRCLE ONE)PER WEEK /PER MTH/ PER QTR OR PER YEAR) AND PLEDGE ENVELOPES WILL BE SUPPLIED TO YOU FOR YOUR PLEDGE .

OR AS A ONCE OFF CONTRIBUTION OF \$ _____

OR OPTION 2 – MY CREDIT CARD PAYMENT PLEDGE IS (PLEASE COMPLETE BELOW):

Please Tick (✓)  

Expiry Date: /

PLEASE DEBIT MY MASTERCARD / VISA CARD ACCOUNT

ON THE..... DAY OF EACH MONTH/QUARTER FOR
 A TERM OF YEARS EXPIRING ON WITH THE
 SUM OF

I UNDERSTAND THAT THIS AUTHORITY MAY BE CANCELLED IN WRITING AT MY OPTION.

SIGNATURE:

Internal office use only :	Done By	Date	Details
Envelope Number assigned			Env #
Entered into Parish on Line			POL#
Welcome Pack Sent			WPR#

OR OPTION 3 – MY DIRECT DEBIT REQUEST PLEDGE IS (PLEASE COMPLETE OVER):