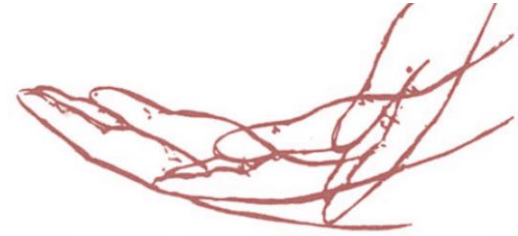




# 'IT IS IN GIVING THAT WE RECEIVE'



## ST MONICA'S THANKS GIVING CONTRIBUTIONS ADVICE FORM

FAMILY SURNAME : \_\_\_\_\_

ADDRESS : \_\_\_\_\_

ADDRESS : \_\_\_\_\_ POSTCODE: \_\_\_\_\_

PHONE : HM \_\_\_\_\_ WK \_\_\_\_\_ MOBILE \_\_\_\_\_

EMAIL : Mr : \_\_\_\_\_ Mrs \_\_\_\_\_

Christian Names	Religion	Date of Birth	Occupation
Mr			
Mrs			
Or Miss			
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#