

OUR COMMITMENT TO ST VINCENT DE PAUL PARISH

SECTION 2 – CONTACT DETAILS

Family Name: Christian Name:

Address: Telephone:

Suburb: Email:

SECTION 3 - THANKSGIVING OFFERING

SUPPORTS PARISH CAPITAL AND RUNNING COSTS, FINANCING OF charitable works and development of the Parish, and the Archbishop's Development Fund

Please indicate your commitment for the three years below:

Progressive Pledge:	1st Year 2015-2016	2nd Year 2016-2017	3rd Year 2017-2018
	1st July - 30th June	1st July - 30th June	1st July - 30th June
Office Use	\$_____ Weekly or	\$_____ Weekly or	\$_____ Weekly or
	\$_____ Monthly or	\$_____ Monthly or	\$_____ Monthly or
	\$_____ Quarterly or	\$_____ Quarterly or	\$_____ Quarterly or
	\$_____ Yearly	\$_____ Yearly	\$_____ Yearly

If you wish to contribute to Thanksgiving through your credit card:-

Please debit my Mastercard , Visacard . (Please indicate card type) with the sum of \$.....

on the day of each month , quarter , year . (please indicate frequency of payment)

I understand that this authority may be cancelled in writing at my option.

Card No: Expiry Date _____

Name On Card: _____

Signature: _____

If you wish us to Direct Debit your Bank Account please tick this box and the Parish Office will contact you.

SECTION 4 - PRESBYTERY OFFERING

Supports the upkeep and running costs of presbytery, support of the priest in this Parish and other needy Parishes, support of sick and retired priests, and support of the Archbishop

If you wish to contribute to the Presbytery through your credit card:-

Please debit my Mastercard , Visacard . (please indicate card type) with the sum of \$.....

on the day of each month , quarter , year . (Please indicate frequency of payment)

I understand that this authority may be cancelled in writing at my option.

Card No: Expiry Date _____

Name On Card: _____

Signature: _____

If you wish us to Direct Debit your Bank Account please tick this box and the Parish Office will contact you.