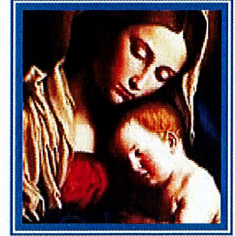


GLENELG CATHOLIC PARISH



Request to pay Thanksgiving Offertory Contributions by CREDIT CARD

I/We hereby make application to pay my/our
Thanksgiving Offertory / Planned Giving contributions to
Glenelg Catholic Parish,
17 High Street, GLENELG SA 5045



1. Name:
Address:
Phone: Email:

2. My / Our pledge/promise to the parish Thanksgiving Offertory / Planned Giving (Second Collection) is:
\$ (per month / per quarter / per year) **[Please circle your choice]**

3. This authority will commence on / /

4. My Thanksgiving Offertory Contribution number is **PG** [Parish to complete]

5. I would like my contribution to be debited from my credit card

Please debit my: MASTERCARD VISA

Card Number:

Name on Card: **[Please print]** Card Expiry Date: / /

I/We will advise the Parish of the cancellation of this request and will not hold the Parish responsible for any action arising from my/our not doing so.

6. Cardholder's Signature (s):

Date: / /

| |
|------------------------------------|
| FOR PARISH OFFICE USE ONLY: |
| Date Received: |
| Date Loaded: |