



St Therese Catholic Parish Mascot

Authority for Recurring Payment by Credit Card (Please print clearly)

Surname	
Christian Name	
Address	
Email	
Contact No	

Type of Card (tick appropriate box)	Mastercard	Visa																	
Card Number	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td> </tr> </table>																		
Cardholder's Name (as appears on card)																			
Expiry Date																			
Payment Amount																			
Payment Frequency	Monthly (on or about the 15th of each month)																		

I hereby authorise St Therese Parish Mascot to debit my Credit Card Account with the amount and at the intervals specified above for my monthly contribution to the Financial Giving Programme.

This authority shall stand, in respect of the above specified Card and in respect of any Card issued to me in renewal or replacement thereof, until I notify St Therese Parish Mascot in writing of its cancellation.

Signature	Date
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Would you like a set of dummy envelopes to put in the collection tray?
(It is not expected that money be placed in these envelopes.)

Yes		No	
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Please either email a copy of the completed form
or place it in the letterbox of the Priest's House.