

MY FINANCIAL PLEDGE TO

☐ St Simon the Apostle Catholic Parish, Rowville

Surname: _____ Given name: _____
Address: _____ Suburb: _____ Postcode: _____
Email: _____ Mobile: _____ Phone: _____
My age group is: ☐ under 20 ☐ 20-29 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☐ 60-69 ☐ 70-79 ☐ 80-89 ☐ 90+

Credit Card

PARISH PRESBYTERY

Please debit my Credit Card with the sum of: \$

every ☐ month ☐ quarter ☐ half-year ☐ year

Name on Card: _____

Please tick ☐  ☐ 

Expiry Date: ____ / ____

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I understand that I may cancel this authority in writing at any time.

Signature: _____ Date: ____ / ____ / ____

© Parish First P/L PO Box 1063, Newport VIC 3015.

Direct Debit (from a nominated bank account – forms available from the Parish Office)

PARISH

PRESBYTERY

My financial pledge will be: \$

every ☐ month ☐ quarter ☐ half-year ☐ year

Envelopes (envelopes available from the Parish Office)

PARISH

PRESBYTERY

My financial pledge will be: \$

every ☐ week ☐ month ☐ quarter ☐ half-year ☐ year

Our Privacy Commitment

The information collected on this card is for Parish information and use only. Be assured that Parish First P/L and our Parish are committed to upholding and maintaining the Privacy Principles and Legislative requirements as set out in the Statutory Regulations of the Australian and State Governments. This relates particularly to the gathering, recording, storing and disclosure of information relating to parish operations and the provision of religious and pastoral care services. We will never disclose your personal information to other third parties for other fundraising purposes without your consent.

