

Your regular contribution will allow us to continue the important pastoral and temporal programs in our parish throughout the year. Enrollment in the pre-authorized monthly donation plan is voluntary.

Benefits:

- You will provide St. Patrick Fallowfield with your donation on a regular basis
- You will receive a tax receipt for your donations
- Pre-authorized donations can be made through your bank account
- You may request to receive envelopes for special collections if you wish
- You may change the amount deducted or cancel at any time with written notification

For further information, please contact the Parish Office or e-mail finance@stpatricksfallowfield.com

Name: A	ddress:
City: F	Postal Code:
Phone: E	-mail:
Would you also require a box of donation envelopes? Ye	es / No
New Parishioner New Subs	criber Amend Existing Donation
Monthly Donation: 🛛 \$25.00 🛛 \$50.00	□ \$100.00 Other: \$
Please Direct my donation to: (Please specify the	e amount if choosing more than one option):
Sunday Offering: Restor	ation:
Maintenance: Other:	
Bank Debit: 1 <sup>st</sup> of the month □   Please include a void cheque □   Transit #: □ □   I authorize the amount indicated above to be charged to th may modify or cancel this authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the may modify or cancel the authorization at any time with we show to be charged to the	e designated account on a monthly basis. I understand that I
Signature:	