

CREDIT CARD GIVING

- A) Bishop Bob Bennett Curacy Fund
- B) Bishop's Discretionary Fund (Bishop's Friends)
- C) Huron Church Camp – Capital, Operating or Bursary
- D) Other as specified

When you go away from home, the hydro, water and heat still work in your house...

Just as bill paying and pay cheque transactions have become easier through pre-authorized withdrawal and automatic deposit, so the Diocese is making it easier for you to support our Diocesan ministries.

IT'S CONVENIENT

Pre-authorized giving is a giving option available at no charge to you. It eliminates the need for you to write a cheque each month.

IT'S ASSURED

If you are away on vacation, out of town on business or sick, your gift will be made ensuring the continued ministry of the church.

HERE'S WHAT TO DO

- Whatever you now give weekly, monthly, quarterly, or annually, simply convert to a monthly amount.
- Fill in the attached form and send it to Heather Moller at Church House or hmoller@huron.anglican.ca
- Your offering will be deducted from your Credit Card monthly on the 15th in the same way you honour many of your other commitments in your life.

WHAT ABOUT RECORDS?

Offerings are recorded automatically and individually on your monthly statement. These offerings are recorded at Church House and included on your annual tax receipt.

IF YOUR CIRCUMSTANCES CHANGE

At any time the amount of your gifts can be changed. Simply notify Heather Moller of the change.

PLEASE INDICATE IF YOU ARE CURRENTLY GIVING THROUGH PRE-AUTHORIZED BANK ACCOUNT DEDUCTIONS AND WISH TO CHANGE TO CREDIT CARD DEDUCTIONS

YES _____

NO _____

CREDIT CARD GIVING AUTHORIZATION FORM

Cardholders Name (please print)

VISA/MASTERCARD number/expiry date

I\We authorize the above named church to debit my\our Credit Card indicated above in the amount of \$ _____ on the 15th of each month until cancelled. This is for givings to _____.

Each donation shall be the same as if I\we had personally presented my\our credit card authorizing the diocese as indicated to debit the amount specified to my\our credit card.

I\We will notify Heather Moller promptly in writing if I\we cease to use the card, or if there is any **change of expiry date**, or if there is any change in amount. This authorization may be cancelled at any time upon written notice by me\us to the Diocese of Huron.

I\We are all the persons who are required to sign on the above credit card. I\We have received a signed copy of this authorization form.

In compliance with the Diocese of Huron Privacy Standards Policy, any information listed hereon is gathered solely for the purpose of administering the pre-approved payments and will be shared strictly on a "need to know" basis.

Date

Cardholders Signature

Date

Cardholders Signature