

Pre-Authorized Debit Agreement Application

☐ New agreement ☐ Revisions to current agreement

Catholic Parish of St. Anne of the Prairies (Trochu, AB)

Current Envelope No (if applicable) _____

Your Name (Print) _____

Address _____ Postal Code _____

Email _____ Daytime Phone _____

Please debit my bank account for the following monthly amounts:

MONTHLY OFFERING	AMOUNT	
Regular Sunday Offering		
Together We Serve		
Building Fund		

Regular Sunday offering pays for the mass & liturgical supplies, utilities, programs provided by our church, etc.

Together We Serve supports 12 agencies in our diocese

Building Fund includes the main church building, rectory, offices & land & capital expenditures.

1. You may deposit this application in the collection basket in a sealed envelope or mail/deliver to the parish office.
2. A tax receipt for your total annual offerings will be issued before the end of February of the following year.
3. ***Please include a VOID cheque or fill out the area below:***

Financial Institution Name: _____

Financial Institution Address: _____ Transit #: _____

Bank #: _____ Account #: _____

4. I (we), as the account holder(s), authorize **The Catholic Parish of St. Anne of the Prairies, Trochu** and my (our) financial institution, to debit, in accordance with the Rules of the Canadian Payments Association, my (our) account at the branch specified above, for the purpose of making a charitable donation to our institutions. The donation will come out on the LAST BANKING DAY OF THE MONTH. This authorization is to remain in effect until **The Catholic Parish of St. Anne of the Prairies, Trochu** has received written or verbal notification from me (us) of its change or termination.

Signature of account holder(s) _____ / _____

Dated _____ at _____

CRA#10800 9549 RP0001