MARY MAGDALENE CHURCH PLEDGE FORM

(To be completed annually)

**PARISHIONER INFORMATION:** Date: \_\_\_\_\_\_\_\_\_\_\_

Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I pledge \_\_\_\_\_\_\_\_\_\_ (**Check one:) \_**\_\_per week: \_\_\_per month: \_\_\_Bi-monthly (the 1st and 15th of the month):

**PAYMENT METHOD:**

**\_\_\_\_\_** Electronic debit/credit card **(\*COMPLETE AUTHORIZATION PORTION OF FORM BELOW)**

**\_\_\_\_\_** Bill- pay through bank (Complete the necessary process with bank. The church name and

 mailing address is: Mary Magdalene Church, 1008 Main Street, East Rochester, NY 14445

**\_\_\_\_\_** Cash/Check via Sunday collection

**\*MARY MAGDALENE CHURCH CREDIT CARD AUTHORIZATION**

Mary Magdalene Church Accepts: \_\_\_\_\_ VISA \_\_\_\_\_ Master Card \_\_\_\_\_ Discover **(CHECK ONE)**

Name as it appears on credit card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_

Credit/Debit card number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_ CCV Code \_\_\_\_\_\_\_ (The 3 or 4 digit number on the back of your card.)

Cardholder’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

*Allow up to 30 days to activate. Automatic giving will continue unless notified to cancel or to the end date*

*Indicated here \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Pledge amounts may be changed or cancelled with 30 days’ notice.*

**PLEASE THIS FORM TO MARY MAGDALENE CHURCH**

**MAIL TO:** MARY MAGDALENE CHURCH, 1008 Main Street, East Rochester, NY 14445

Thank you for your contribution. Your support is greatly appreciated.

Please contact the Stewardship team if you have any questions.

Sue Pagano (585-586-1491) Mimi Youngman (585-797-4707) Denise Donato(585-329-0895)

MMC Pledge Form Oct 2020 Revised