

## AUTHORIZATION FORM

This form does not replace your pledge card. Please complete and return your pledge card as well as this form.

**Name of the organization:** First Congregational Church of La Grange Illinois

THE FEDERAL BUREAU OF INVESTIGATION, U. S. DEPARTMENT OF JUSTICE, WASHINGTON, D. C.

FOR OFFICE USE ONLY		ENVELOPE/DONOR #	DATE
Effective date of authorization: _____ / _____ / _____			
Type of authorization:	<input type="checkbox"/> New authorization <input type="checkbox"/> Change donation amount <input type="checkbox"/> Change banking information <input type="checkbox"/> Discontinue electronic donation <input type="checkbox"/> Change donation date		
Last Name	First Name		
Address		City	
Email Address		Sate	Zip
<b>DATE OF FIRST DONATION:</b> <hr style="border-top: 1px solid black; width: 100px; margin-bottom: 5px;"/> <span style="display: inline-block; width: 100px; height: 15px; vertical-align: middle;"></span> / <span style="display: inline-block; width: 100px; height: 15px; vertical-align: middle;"></span> / <span style="display: inline-block; width: 100px; height: 15px; vertical-align: middle;"></span> 2018		<b>FREQUENCY OF DONATION:</b> <hr style="border-top: 1px solid black; width: 100px; margin-bottom: 5px;"/> <input type="checkbox"/> Weekly on Mondays <input type="checkbox"/> Monthly on the 1 <sup>st</sup> <input type="checkbox"/> Monthly on the 15 <sup>th</sup>	
Please debit my donation from my (check one): <input type="checkbox"/> Savings Account (contact your financial institution for Routing #) <input type="checkbox"/> Checking Account (attach a voided check below)		FUNDS: All ACH giving is directed to the Budget Fund for the Operations of the Church AMOUNTS: \$ _____ Routing Number: _____ <small>Valid Routing # must start with 0, 1, 2, or 3</small> Account Number:  Routing Number _____ Account Number _____ Check Number _____	
I authorize the above organization to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.			
Authorized Signature: _____ Date: _____			

# Living Generously

Kindly return this card by December 3 so that we can plan for your participation in our 2018 ministries.

I/We will help to close the 2017 Budget Gap by donating a one-time gift.

\$50  \$100  \$250  \$500  Other

In 2018, I plan to give \$\_\_\_\_\_ each  week  month beginning \_\_\_\_\_ 2018  
for an annual total of \$\_\_\_\_\_.

I understand that this commitment can be changed at any time by giving notice to the church office.

**Office Use:**  
Date Recorded: \_\_\_\_\_  
  
**Acknowledged:** \_\_\_\_\_  
  
**By:** \_\_\_\_\_

Yes No

May we Text you?

Yes No

Sign Up For the Tidings by Email

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Name

Phone

May we Text you?

111

— 11 —

yes NO

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71

#### Other Contact Info

I/we will participate in these ways:

<input type="checkbox"/> Greeter/Usher/Liturgist	<input type="checkbox"/> Teach/Shepherd Sunday School	<input type="checkbox"/> Wedding/Special Event Host(ess)	<input type="checkbox"/> I will write notes to people
<input type="checkbox"/> Audio/Video Tech	<input type="checkbox"/> Assist in Messy Church	<input type="checkbox"/> Set Up/Clean Up for church functions	<input type="checkbox"/> I would like to be on a prayer team
<input type="checkbox"/> Host Coffee Hour	<input type="checkbox"/> Nursery Assistant	<input type="checkbox"/> Help move stuff	<input type="checkbox"/> I will serve on a Ministry Team
<input type="checkbox"/> Help Count the Offering	<input type="checkbox"/> Youth Ministry Assistant	<input type="checkbox"/> Clean	
<input type="checkbox"/> Deliver Flowers	<input type="checkbox"/> Sing in Choir/Ring Bells	<input type="checkbox"/> Tend Gardens	
<input type="checkbox"/> Visit the sick	<input type="checkbox"/> Donate Food for Pantry	<input type="checkbox"/> Paint/repair/maintain	I am available:
<input type="checkbox"/> Help in Office	<input type="checkbox"/> Work for Justice (letters, marches)	<input type="checkbox"/> Mow Lawns/Shovel Snow	<input type="checkbox"/> Mon—Fri <input type="checkbox"/> day <input type="checkbox"/> evening
<input type="checkbox"/> Assist in Publicity/Marketing	<input type="checkbox"/> Feed the Hungry (Saturday Meals)	<input type="checkbox"/> _____	<input type="checkbox"/> Sat or Sun <input type="checkbox"/> day <input type="checkbox"/> evening