



# St. Alphonsus Catholic Parish

Windsor, Ontario

Please consider signing up for Pre-Authorized Debit to support our parish monthly!

## Your Information: (please print clearly)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Last Name (Spouse/other): \_\_\_\_\_ First Name (Spouse/other): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Note: (If end date is recorded new form has to be filled out every year)

## Your Offertory Gifts:

My/Our monthly parish offering: \$ \_\_\_\_\_ per month

I/we would also like to contribute to the following annual special collections:

New Year / Solemnity of Mary: \$ \_\_\_\_\_ (January)

Share Lent: \$ \_\_\_\_\_ (March or April)

Good Friday: \$ \_\_\_\_\_ (March or April)

Easter Collection: \$ \_\_\_\_\_ (March or April)

St. Peter's Seminary Collection: \$ \_\_\_\_\_ (May)

Priest Pension Fund: \$ \_\_\_\_\_ (June)

Parish Thanksgiving Appeal: \$ \_\_\_\_\_ (October)

World Mission Sunday Collection: \$ \_\_\_\_\_ (October)

Christmas Collection: \$ \_\_\_\_\_ (December)

Building Fund: \$ \_\_\_\_\_ this year; or, \$ \_\_\_\_\_ per month

Other (please indicate): \_\_\_\_\_ \$ \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Please submit this completed form to the parish office along with a personal cheque marked "VOID".

To change or cancel your pre-authorized debits at any time, simply contact the parish office; please note that it may take 2-3 weeks for us to cease your debits. Please do not hesitate to contact us if you have any questions.

**THANK YOU FOR SUPPORTING OUR PARISH!**