



**Corpus Christi Parish**  
*Direct Debit Authorization Form*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

New  Revision

**Automatic Withdrawal**

Bank: \_\_\_\_\_ Branch: \_\_\_\_\_  
 Account Number: \_\_\_\_\_  
 (Please attach void cheque for verification and information)

**OR**

**Credit/Debit Card**

Visa/Mastercard #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Please specify below which funds you would like your gifts to be directed towards and the amount.

	Weekly (\$)	Monthly (\$)	Annually (\$)	Day/Month *
Sunday Offering				
St. Vincent de Paul				
Together in Action				
New Year's Day - January 1				
Seminarian Fund				
Good Friday - Holy Land				
Easter Sunday				
The Pope's Pastoral Works				
Church Maintenance				
World Mission Sunday				
Clergy Pension				
Catholic Education				
Christmas				

\* For weekly/monthly/annual gifts, please specify the day or the month you wish to have your gifts withdrawn in the last column.

*I authorize Corpus Christi Catholic Church, 404 Northmount Place N.W. Calgary, Alberta to receive the amounts mentioned above by Direct Debit in installments as specified above. I understand that I can change or delete my donation amount at any time with written confirmation to the Parish staff. I understand that I must allow at least 2 weeks to allow these changes to be applied.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Place in a sealed envelope marked "Accountant" and return to Corpus Christi  
by dropping off at the office or placing in the collections basket**

Your donations to our parish is of great value at this critical time. You are welcome to make use of the different means available.

**Thank you very much. God bless your generous hearts!**

Let us do the work for you by providing us details just once. Just resubmit the form when you want to change the instructions.