

### Mary, Mother of the Redeemer Parish

1714 - 14 Avenue N.E. Calgary, AB T2E 1G3

www.mmredeemer.ca

403.276.1689

# **Pre-Authorized Donation Form**

I (We),_			authorize Mary, Mother		
of the R	edeemer Pa	arish to draw money from	my chequing acco	ount as a charitable	
donation	n, according	to the following informat	ion:		
		Chequing account	with (bank's nam	e)	
Donatio	on cause(s)	:			
		Regular donation	Amount \$		
		Together In Action	Amount \$		
		Beacon of Hope	Amount \$		
		Building Fund	Amount \$		
		Children Liturgy	Amount \$		
		Catechesis	Amount \$		
		Maintenance Fund	Amount \$		
		TOTAL DONATION	Amount \$		
Donation frequency:					
		Weekly	Start date:		
		Bi-weekly	Start date:		
		Monthly	Start date:		
	(City), AB	Date (Month, day a	nd Year):		
Payor					
		First Name		Last Name	
Payor		Signature	<del>_</del>	Phone number	
Contact		•			
	-	Home Address		Postal Code	



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THIS AUTHORIZATION WAT BE CANCEL	LLED AT ANT TIME UPON
NOTICE WRITING TO VERIFY THE IDEN	TITY OF THE DONOR AND 30
DAYS BEFORE THE DUE DATE.	
I (WE)	UNDERSTAND THAT
TO REVOKE THIS AUTHORIZATION, NO	TIFICATION MUST BE GIVEN
TO MARY, MOTHER OF THE REDEEMER	R PARISH.
Payor	
Signature	Phone number

#### PLEASE ATTACH A VOID CHEQUE HERE

