**Planned Giving Program – Direct Debit from Credit Card or Envelopes**

**Please fill in and return to the parish office.**

**Personal Details**

|  |  |
| --- | --- |
| **Name:** |  |
| **Address:** |  |
| **Contact Telephone:** | **Home:** |
| **Mobile** |
| **Email:** |  |

I wish to contribute to the Planned Giving Program (please tick one box):

❑ **planned giving envelopes** (The office will contact you once your envelopes are ready to be picked up.)

**OR:**

❑ **Credit Card**

|  |  |  |
| --- | --- | --- |
| Type of Card | Mastercard/Visa (please specify) | |
| Card Number |  | Expiry date: |
| Name on Card | (please print) | |

**Authority to Debit Card**

Please debit the above card the sum of $ \_\_\_ each month ❑ or quarter ❑ (please specify).

I understand that this authority may be cancelled or altered by me at any time. Any changes or alterations to the authorised amount should be directed in writing to the Parish Office.

Card holder signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

❑ **Would you like a receipt at the end of the financial year to claim a tax deduction?**

**Name (s) to be on tax receipt\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

St Declan’s Parish is collecting your personal information for the purposes of accepting donations and contacting you in relation to planned giving and donations to the parish. Your personal information will be collected in accordance with the collection notice which can be found at <https://www.stdeclansparish.org/pages/collection-notice>.