



# Ascension Catholic Parish

"Sharing the Spirit Together in Christ"

## Donor Wall Contribution

Donations will be applied to the Building Fund

### PERSONAL DETAILS (Please Print)

Tax receipt will be issued in this name.

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_ Email Address \_\_\_\_\_

### Text Requested On Donor Block (Print Clearly)

Maximum 23 \_\_\_\_\_ characters including spaces.

'In Memory of'  Check (✓) if applicable

Donor Block Selection per amount  
(Turn page over)

1st choice # \_\_\_\_\_ 2nd choice # \_\_\_\_\_

OR

I prefer to remain 'Anonymous'  Check (✓) if applicable

### One Lump Sum Donation (Please Circle):

\$2,500	\$5,000	\$7,500	\$10,000	\$15,000	\$20,000	\$25,000	\$50,000	\$100,000
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### Payment method (select one)

Credit Card  Direct Debit  Cheque  Cash  Publically traded securities

\* Complete additional Diocese of Calgary donation form located on Parish website

### Credit Card Form (check one)

MasterCard  Visa

Card # \_\_\_\_\_ Expiry Date \_\_\_\_/\_\_\_\_/\_\_\_\_

3 digit Security # of Card \_\_\_\_\_

OR

### Direct Debit Form; please attach a blank VOID cheque or complete the following.

Bank Name \_\_\_\_\_

Branch # \_\_\_\_\_ Bank # \_\_\_\_\_ Account # \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please print and sign the completed form. Place in a sealed envelope, marked "Donor Wall Contribution". Place in the collection basket at one of the weekend Masses or hand deliver to the Parish Office.

1100 Berkshire Blvd NW, Calgary AB T3K 3M3

Phone: 403-275-2240 | Fax: 403-274-3969

E-mail: finance@ascensionparish.ca

For office use only: Rec'd 2020/\_\_\_\_/\_\_\_\_ Cheque 2020/\_\_\_\_/\_\_\_\_ Cash 2020/\_\_\_\_/\_\_\_\_ Credit/Debit 2020/\_\_\_\_/\_\_\_\_ E-Transfer 2020/\_\_\_\_/\_\_\_\_