



ASCENSION CATHOLIC PARISH

To be Missionary Disciples

PRE-AUTHORIZED DONATION ("PAD") FORM

<input type="checkbox"/> New PAD User	<input type="checkbox"/> Revise existing PAD donation
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PARISHIONER INFORMATION

Name _____

Address _____

City and Postal Code _____

Telephone number _____

E-mail Address _____

By checking this box, I agree to receive newsletter communications from Ascension Catholic Parish via e-mail. I can withdraw my consent by contacting the Parish office.

FORM OF PAYMENT:

Debit Card (Preferred Method)(please include a void cheque)
 Bank Branch Name: _____
 Branch No.: _____ Bank No.: _____ Account No.: _____

Credit Card
 Credit Card No: _____
 Expiry Date on Card: _____ 3-digit Security on Card: _____

Make my donation go further by adding 2.5% to cover credit card processing fee.

By signing below, I hereby authorize Ascension Catholic Parish to process the following amount indicated below on the
 2nd of each month 17th of each month **both** the 2nd and 17th of each month
 I understand that I can change my giving at any time by contacting the Parish office.

AMOUNT OF DONATION (We suggest 70% to Operations and 30% to Building Fund, plus a donation for TIA)

Operations \$ _____

Building Fund \$ _____

Together in Action ("TIA") \$ _____

TOTAL: \$ _____

For Joint Accounts, we require the signature of both account holders

SIGNATURE OF ACCOUNT HOLDER

SIGNATURE OF ACCOUNT HOLDER (if applicable)

Printed Name

Printed Name

Completed forms may be mailed, hand-delivered, or emailed to the Ascension office or placed in a sealed envelope and dropped into the collection basket at a weekend Mass. If you would like to e-mail your form, please email it to finance@ascensionparish.ca. If you have any questions, please contact the bookkeeper at 403-275-2240 ext. 8.

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