



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 Redeemer Parish to draw money from my chequing account as a charitable donation, according to the following information:

Chequing account with (bank's name) _____

Donation 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 and Year): _____

Payor _____
First Name Last Name

Payor _____
Signature Phone number

Contact _____
Home Address Postal Code
