

Diocesan Pre-Authorized Remittance Authorization Card

Name _____

Address _____

City _____ Postal Code _____

Phone # _____ Envelope # _____

Parish/Church _____

My offering to my Parish will be in the amount of \$ _____
on the 1st or 15th of each month.

I prefer to use

Automatic debit – please attach a “VOID” cheque.

Credit card { } Visa or { } MasterCard

Card # _____

Exp: _____ / _____

I/We have read and understand the terms of this authorization and acknowledge receipt of a copy thereof.

Signature: _____

Date: _____

The Diocese of Nova Scotia  Prince Edward Island

Office Use: Date Received _____ Date Started _____

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“Whether or not I am there....

...my church has on-going commitments every week that need my offering. My church is important to me, and so is my financial commitment to its work. That is why I use the Diocesan PAR Program to fulfill my commitment.”

Please give your authorization card to your Church Office/Parish Contact Person, put it on the offering plate or mail to;

The Diocese of Nova Scotia & Prince Edward Island
Diocesan PAR Program - Attention: Tammy Cummins

1340 Cathedral Lane, Halifax NS B3H 2Z1
tcummins@nspeidiocese.ca 902 420 0717

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