

PARISH NUMBER	
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ARCHDIOCESE OF DURBAN
PARISH OF ST. JOSEPH'S MORNINGSIDE

DEDICATION OF FINANCIAL RESOURCES
 JANUARY – DECEMBER

"If you give what you do not need, it is not giving!" (Mother Teresa)

SECTION A			
SURNAME		FIRST NAME	
TELEPHONE	(H)	(W)	(C)
MEMBER ADDRESS AND EMAIL DETAILS			
ADDRESS			
EMAIL			

Please commit to assisting in building our Parish and the wider Community we are called to serve!

I PLEDGE	R	METHOD		FREQUENCY	
		Electronic Payment		Weekly	
<i>Please choose only one option under Frequency and Method.</i>		Monthly Debit Order		Monthly	
		By Envelope		Annually	
SIGNATURE		DATE			

FILL IN THIS SECTION ONLY IF YOU DO OR IF YOU WISH TO PAY BY DEBIT ORDER			
ACCOUNT NAME		BANK	
BRANCH		BRANCH CODE	
ACCOUNT TYPE		ACC NUMBER	
<i>i/We acknowledge that this Authority may be ceded or assigned to a third party if the Agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Agreement, this Authority and Mandate cannot be assigned to any third party.</i>			
SIGNATURE		DATE	

Should you wish to process your payment electronically, please include your Name and Parish Number as the Beneficiary / Reference