



THE CATHOLIC PARISH OF  
SAINT AMBROSE  
CONCORD WEST

2 BURKE ST. CONCORD WEST NSW 2138  
P.O. BOX 11 CONCORD WEST NSW 2138  
(02) 9743 1023  
ADMIN@STAMBROSE.ORG.AU

## PLANNED GIVING FORM

### YOUR COMMITMENT TO PARISH PLANNED GIVING

Name \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Please tick your preferred method of giving below (non-deductible donation)

My Weekly Pledge is \$ \_\_\_\_\_

Cash or cheque donations in weekly envelopes

B-Point giving (through website or QR-Code)

Tap & Go

Credit Card donations (see below for standing authority)

Standing authority for recurrent periodic payment by credit card

Credit card debts will be processed monthly. My Monthly Pledge is \$ \_\_\_\_\_

Name on Credit Card \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiry Date \_\_\_\_\_

Master Card  Visa

Cardholder's Signature \_\_\_\_\_ Today's Date \_\_\_\_\_

I hereby authorise St Ambrose Catholic Church Concord West, to debit my card account with the monthly amount specified above. This authority shall stand, in respect of the above and in respect of any card issued to me in renewal or replacement thereof, until I notify St Ambrose Catholic Church Concord West, in writing of its cancellation or change of amount(s). This credit card authority will cancel any previous authority I may have given to St Ambrose Catholic Church, Concord West.