

Regina Mundi Parish

QUEEN OF THE WORLD

Rev. Adam Voisin, Pastor

631 Mohawk Road West
Hamilton, ON L9C 1X7
Phone: (905) 385-3297
Fax: (905) 385-2700
reginamundi@rogers.com

WEEKLY OFFERING PRE-AUTHORIZED PLAN

1. Complete and sign this Pre-authorized Payment Plan Agreement
2. Complete Banking Information
3. Return the completed form to the parish office.

Payer's Name and Address (please print clearly)

Banking Information

(refer to sample to obtain numbers from your chq)



Please complete the attached Pre-Authorized Debit Plan Worksheet for regular and special offerings to the parish and selected charities. Please note that for regular weekly offerings and special/annual collections EFT will occur on the Friday before the Sunday of the collection and for regular monthly offerings EFT it will occur during the week before the 1st Sunday of the month.

Regina Mundi Parish

QUEEN OF THE WORLD

Rev. Adam Voisin, Pastor

631 Mohawk Road West
Hamilton, ON L9C 1X7
Phone: (905) 385-3297
Fax: (905) 385-2700
reginamundi@rogers.com

PRE-AUTHORIZED DEBIT PLAN WORKSHEET

To schedule your annual contributions in advance, please complete the worksheet below:

	Payment Amount	Payment Frequency		Total
<u>In Support of Regina Mundi Parish</u>				
Sunday Offering	\$ _____	Weekly	x52	\$ _____
	or	Monthly	x12	\$ _____
St. Vincent de Paul	\$ _____	Monthly	x12	\$ _____
Building/Maintenance Fund	\$ _____	Monthly	x12	\$ _____
Mary Mother of God (January)	\$ _____	Annually	x1	\$ _____
Easter (April)	\$ _____	Annually	x1	\$ _____
Easter Flowers (April)	\$ _____	Annually	x1	\$ _____
Christmas (December)	\$ _____	Annually	x1	\$ _____
<u>In Support of the Diocesan Collections</u>				
Seminary Education (February)	\$ _____	Annually	x1	\$ _____
Share Lent (March)	\$ _____	Annually	x1	\$ _____
Good Friday (April)	\$ _____	Annually	x1	\$ _____
Pope's Pastoral Works (May)	\$ _____	Annually	x1	\$ _____
Needs of the Canadian Church (Sept)	\$ _____	Annually	x1	\$ _____
Evangelization of Peoples (Oct)	\$ _____	Annually	x1	\$ _____

By signing this form I/we authorize Regina Mundi Church to collect funds as instructed above and to charge the amounts specified to my/our bank account. This authorization may be cancelled at any time upon written notice to the parish office. Delivery of this signed form to Regina Mundi Parish constitutes authorization by me/us for the Parish to collect funds starting as of the date indicated below:

Cancellation of Agreement: Please advise that the Payor may obtain a sample cancellation form, or further information on their right to cancel a PAD agreement, at their financial institution or by visiting www.cdnipay.ca

Date: _____

Signature: _____

Signature: _____ (if joint account)