



Commitment Card for 2019 Giving

We thank you for your generous acceptance of Christian stewardship and pray that you may find the level of giving that is right for you as you progress in your journey of faith and commitment.

Yes! I/We will support the church
in the coming year.

Choose one:

- \$ _____ weekly for 52 weeks
- \$ _____ bi-monthly for 24 periods
- \$ _____ monthly for 12 months
- \$ _____ as follows: _____

ACH or Credit Card Information is on the back.

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Phone: _____

Please complete this commitment card and bring it to worship with you on November 11th, or mail or bring it by the Church Office at your convenience.

Thank you... and we thank God for you!



Commitment Card for 2019 Giving

We thank you for your generous acceptance of Christian stewardship and pray that you may find the level of giving that is right for you as you progress in your journey of faith and commitment.

Yes! I/We will support the church
in the coming year.

Choose one:

- \$ _____ weekly for 52 weeks
- \$ _____ bi-monthly for 24 periods
- \$ _____ monthly for 12 months
- \$ _____ as follows: _____

ACH or Credit Card Information is on the back.

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Phone: _____

Please complete this commitment card and bring it to worship with you on November 11th, or mail or bring it by the Church Office at your convenience.

Thank you... and we thank God for you!



Commitment Card for 2019 Giving

We thank you for your generous acceptance of Christian stewardship and pray that you may find the level of giving that is right for you as you progress in your journey of faith and commitment.

Yes! I/We will support the church
in the coming year.

Choose one:

- \$ _____ weekly for 52 weeks
- \$ _____ bi-monthly for 24 periods
- \$ _____ monthly for 12 months
- \$ _____ as follows: _____

ACH or Credit Card Information is on the back.

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Phone: _____

Please complete this commitment card and bring it to worship with you on November 11th, or mail or bring it by the Church Office at your convenience.

Thank you... and we thank God for you!

You may also call the office to provide the information below, or place your Commitment Card in an envelope when you turn it in.

ACH Debits

I/We hereby authorize First United Methodist Church to initiate debit entries to our

___ checking OR ___ savings account

I choose to have \$_____ deducted from my account once a month on the 15th.

Bank Name _____

Routing # _____

Account # _____

(or attach a voided check)

This authorization will remain in effect until First United Methodist Church has received written notification from me regarding termination.

Signature Date

Credit Cards

I/We hereby authorize First United Methodist Church to charge my church offering to my credit card on the 15th day of each month. This agreement may be cancelled at any time and will remain in effect until notified in writing.

Amount to be charged each month \$ _____

Credit Card # _____

Expiration Date ____/____

Billing Zip Code _____

Email _____

Signature Date

You may also call the office to provide the information below, or place your Commitment Card in an envelope when you turn it in.

ACH Debits

I/We hereby authorize First United Methodist Church to initiate debit entries to our

___ checking OR ___ savings account

I choose to have \$_____ deducted from my account once a month on the 15th.

Bank Name _____

Routing # _____

Account # _____

(or attach a voided check)

This authorization will remain in effect until First United Methodist Church has received written notification from me regarding termination.

Signature Date

Credit Cards

I/We hereby authorize First United Methodist Church to charge my church offering to my credit card on the 15th day of each month. This agreement may be cancelled at any time and will remain in effect until notified in writing.

Amount to be charged each month \$ _____

Credit Card # _____

Expiration Date ____/____

Billing Zip Code _____

Email _____

Signature Date

You may also call the office to provide the information below, or place your Commitment Card in an envelope when you turn it in.

ACH Debits

I/We hereby authorize First United Methodist Church to initiate debit entries to our

___ checking OR ___ savings account

I choose to have \$_____ deducted from my account once a month on the 15th.

Bank Name _____

Routing # _____

Account # _____

(or attach a voided check)

This authorization will remain in effect until First United Methodist Church has received written notification from me regarding termination.

Signature Date

Credit Cards

I/We hereby authorize First United Methodist Church to charge my church offering to my credit card on the 15th day of each month. This agreement may be cancelled at any time and will remain in effect until notified in writing.

Amount to be charged each month \$ _____

Credit Card # _____

Expiration Date ____/____

Billing Zip Code _____

Email _____

Signature Date