



St. Thomas The Apostle Catholic Church Online Giving Registration Form

Please complete the donation information below to process your contribution. All information will be kept confidential and will not be given to or used by any other organization

Our Online Giving process is used to **create** single or recurring donations. To **modify** or **stop** recurring donations please contact the Parish Office at (770) 432-8579 Ext: 109.

Effective date of authorization: _____	
Type of authorization form:	<input type="checkbox"/> New authorization <input type="checkbox"/> Changing banking information <input type="checkbox"/> Change donation amount <input type="checkbox"/> Discontinue electronic donation <input type="checkbox"/> Change donation date

Parishioner/Envelope Number: <i>(Not required, but helpful)</i>		
First Name:	Last Name:	
Address:		
City:	State: <i>(Required)</i>	Zip: <i>(Required)</i>
Phone Number: () <i>(Required)</i>	E-mail Address: <i>(Not required, but helpful)</i>	

Donation Form: <i>(Enter banking information below)</i>			
Type of Account: <i>(Please check one)</i>	Name of Bank	Bank Routing Number	Bank Account Number
Checking <input type="checkbox"/> Savings <input type="checkbox"/> <i>(Choose One)</i>			
I authorize St. Thomas the Apostle Catholic Church and Sage Payment Solutions, Inc. to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.			
Authorized Signature: _____			Date: _____

Credit Card: <i>(Check one)</i>	Visa <input type="checkbox"/>	MasterCard <input type="checkbox"/>	Discover <input type="checkbox"/>	American Express <input type="checkbox"/>
Account Number:		Expiration Date: <i>(mm/yy)</i>		
Name of Cardholder:				
Address:				
City:	State:		Zip:	
I authorize St. Thomas the Apostle Catholic Church and Sage Payment Solutions, Inc. to charge my credit card in accordance with the information above.				
Signature: _____			Date: _____	
<i>(As it appears on the credit card)</i>				

Scheduled Primary Collections:

Parish Offertory:		Capital Building Fund:		St. Vincent DePaul		Enter Start Date (mm/dd/yyyy)
Enter Amount:	\$	Enter Amount:	\$	Enter Amount:	\$	

Donation Frequency: (Check one only)	<input type="checkbox"/> Weekly Monday	<input type="checkbox"/> Monthly on the 1st	<input type="checkbox"/> Quarterly on the 1st
	<input type="checkbox"/> Weekly Friday	<input type="checkbox"/> Monthly on the 15th	<input type="checkbox"/> Quarterly on the 15th
	<input type="checkbox"/> Semi Annually on the 1st		<input type="checkbox"/> Annually on the 1st

Scheduled Second Collections:
(All donations will be collected one time only on the 1st or 15th of the month corresponding to the mass collection)

	Month Collected	Enter Amount	Donation Frequency: (Select one for each)	
Catholic Relief Services	January	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Catholic Communications	February	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Black and Indian Mission	March	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Catholic Home Mission	March	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Mission Cooperative	March	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Holy Land (Palm Sunday)	April	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Archdiocesan Seminarians (Easter)	April	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Archdiocesan Hispanic Ministries	May	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Peter's Pence	June	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Saint Vincent DePaul Society	July	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Catholic University of America	August	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Archdiocesan Seminarians	September	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Church in Latina America Mission	October	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Central-Eastern Europe Mission	October	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
World Missions	October	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Campaign for Human Development	November	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Retirement Fund for the Religious	December	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th
Catholic Charities (Christmas)	December	\$	<input type="checkbox"/> 1st	<input type="checkbox"/> 15th

Please mail the completed form with a voided check or voided savings deposit slip:

St. Thomas the Apostle Catholic Church
4300 Kings Springs Road SE
Smyrna, GA 30082-4214