

Date: \_\_\_\_\_ Parish: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

Debit    Credit

Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Month \_\_\_\_\_ Year      3-Digit Security Code: \_\_\_\_\_

Amount: \_\_\_\_\_      Card Type:    Visa    MC    Discover

Authorization Signature: \_\_\_\_\_

Department:      Christian Formation

Ministry Formation



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