



## St. John's Church, Thorold

### Pre-Authorized Giving Form

Please return or mail to  
12 Carleton St. S.  
Thorold, Ontario L2V 5C2

At St. John's Church, Thorold, we represent a community of family and friends with a shared vision to empower people to learn about God through scripture, influence the world in a Christ-like manner, and find peace, love, hope, and joy in God. Together we live out our core values in the world.

On this shared path, we pool our resources gladly. We chip in with the work required and stand ready to give a hand as we're able. We also accept a hand of support when it is needed. By pitching in together with our time, talents and treasure, we grow as individuals spiritually as we help to grow the spirit of good in our local community and beyond.

When you use Pre-Authorized Giving it not only helps our church plan its annual budget. It means our church can plan its ministries. It enables us to move from budget talk to ministry, outreach, activism, prayer, and caring for one another. It means we can focus more on why we exist as a community of believers rather than how we're going to make ends meet.

**Thank you for your support of St. John's Church, Thorold. You make a difference.**



Easy Giving through Pre-Authorized Giving

**St. John's Church, Thorold**

Business Number: **108099771RR0106**

New\*       Increase       Decrease       Change Banking\*       Cancel

Name(S) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

\* For **New** or **Changed Banking**, please provide a void cheque OR complete the table:

Transit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>										
Institution	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>										
Account Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I/we hereby authorize you to debit my/our account each month on the \_\_\_\_\_ (1<sup>st</sup>, 12<sup>th</sup>, 23<sup>rd</sup>, etc.) in the amount of \$ \_\_\_\_\_ payable to the Diocese of Niagara on behalf of St. John's Church, Thorold.\*\* Your treatment of each payment shall be the same as if I/we had personally issued a cheque authorizing you to pay as indicated and to debit my/our account accordingly.

**This authorization may be canceled upon written notice. Please note that we must receive any change by the 15<sup>th</sup> of the month for it to take effect for the following month.**

Signature (1) \_\_\_\_\_ Date \_\_\_\_\_

Signature (2) \_\_\_\_\_ Date \_\_\_\_\_

\*\*The Diocese of Niagara remits Pre-Authorized Giving donations back to St. John's, Thorold. Please contact the church office at 905-227-5431 with any questions or to make any changes.

Also please note you can set up monthly donations through credit card by going to our church website [www.stjohnsthorold.com](http://www.stjohnsthorold.com) and clicking the *donate now* button.