

2019 Tithe Pledge

Membership ID:

Name:

Address:

City & Zip:

E-Mail:

Preferred E-Mail:

Home Phone:

Cell Phone(s):

(Please complete one of the below). I understand this is not a legally binding contract.

Regular Sunday Tithing Contribution Only

Current **Weekly** Gift \$ _____ + Additional Gift \$ _____ = New Gift \$ _____

Current **Monthly** Gift \$ _____ + Additional Gift \$ _____ = New Gift \$ _____

Current **Yearly** Gift \$ _____ + Additional Gift \$ _____ = New Gift \$ _____

- I have remembered the parish in my will.
- I would like to talk to someone about naming Sacred Heart in my will.
- I am financially unable to tithe at this time.

Please select ONE tithing option:
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Electronic giving realizes a cost savings to the parish and maximizes your tithe gift!

#1) ____ **AUTO DEDUCT.**

Sacred Heart will initiate debit entries to your account based on **one** bullet option you select below.

If this is the first time you are opting for electronic giving, **please include a voided check.**

- ____ Once/month on either ____ 1st or ____ 15th
- ____ Twice/month on the 1st **and** the 15th
- ____ Weekly, every Tuesday

#2) ____ **MANAGE MY OWN DONATION.**

- ____ no envelopes required, I use online bill-pay
- ____ keep my current envelope schedule
- ____ change me to monthly
- ____ change me to weekly

Thank you for tithing to our Sacred Heart parish family!

Save yourself a stamp and complete this online at www.sacredheartwdm.org/tithing

or return your Stewardship/Tithing Form :

- 1) Via enclosed return envelope 2) E-mail to office@sacredheartwdm.org 3) Fax: 515.225.0286
If you have questions please call our Parish Office: 515.225.6414