

# St. Anthony of Padua Parish

## Electronic Funds Transfer "eGiving" Account Set Up

You may sign up on line at [www.saintanthonyparish.org](http://www.saintanthonyparish.org) and follow the links to "e Giving" or complete this form.

Use this form to make automatic electronic contributions from your bank account or credit card. Up to three types of contributions may be entered on the same form. If no start date is provided, the option will be established on the date the form is received, and the bank account or credit card will be debited the following week. This form gives the church, and its agent, GFTS LLC, permission to process your contribution.

NAME(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_ ENV # \_\_\_\_\_

EMAIL: \_\_\_\_\_ (please fill in env # if known)

On-line Access Password: \_\_\_\_\_  
(if desired)

Do you want to:  Set up a new contribution  Make a change to an existing account

If this is a change to an existing account, do you want to change the:

Contribution Amount  Bank Name and/or Account Number  Credit /Debit Card Name and/or Card Number

**Please choose one of the following payment methods:**

***Will you be having funds transferred from your bank or checking account?***

If so please attach a ***voided check*** OR complete the following information:

**BANK NAME:** \_\_\_\_\_

**ACCOUNT TYPE:**  Savings  Checking **Account Number #:** \_\_\_\_\_

**ROUTING/ABA NUMBER:** \_ \_ \_ \_ \_ (your bank can provide this information)

***Will you be using a credit card?***

**NAME (AS IT APPEARS ON CARD):** \_\_\_\_\_

**CREDIT CARD NUMBER:** \_\_\_\_\_

**EXPIRATION DATE:** \_\_\_\_ / \_\_\_\_ **CVVII** \_\_\_\_\_ \*

\* CVVII is a 3 digit number on the back right of the signing area or a 4 digit number on the front right side of an AMEX card.

***Will you be using a debit card?***

**NAME (AS IT APPEARS ON CARD):** \_\_\_\_\_

**CREDIT CARD NUMBER:** \_\_\_\_\_

**EXPIRATION DATE:** \_\_\_\_ / \_\_\_\_

**Continue on the back page**



Electronic Contributions can be made for your regular Sunday Contribution, Holy Days of Obligation, Debt Reduction, and Those in Need. You may also specify other one time contributions. You can make these payments weekly (**W**), monthly (**M**), quarterly (**Q**), or annually (**A**). Please complete the following information:

DONATION TYPE	START DATE	AMOUNT `	FREQUENCY
		(Each Withdrawal)	(Circle your Choice)
<input type="checkbox"/> SUNDAY GIVING	_____	_____	W M Q A
<input type="checkbox"/> CAPITAL CAMPAIGN	_____	_____	W M Q A
<input type="checkbox"/> ST. ANTHONY~ST. JOSEPH SCHOOL- <i>required for matching gifts</i>	_____	_____	W M Q A
<input type="checkbox"/> DEBT REDUCTION	_____	_____	W M Q A
<input type="checkbox"/> THOSE IN NEED	_____	_____	W M Q A
<input type="checkbox"/> OTHER	_____	_____	W M Q A
<input type="checkbox"/> CHRISTMAS December 25	_____	_____	A
<input type="checkbox"/> EASTER	_____	_____	A
<input type="checkbox"/> SOLEMNITY OF MARY Jan 1	_____	_____	A
<input type="checkbox"/> ASCENSION	_____	_____	A
<input type="checkbox"/> ASSUMPTION August 15	_____	_____	A
<input type="checkbox"/> ALL SAINTS November 1	_____	_____	A
<input type="checkbox"/> ALL SOULS November 2	_____	_____	A
<input type="checkbox"/> IMMACULATE CONCEPTION Dec 8	_____	_____	A

**SIGNATURE :** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Privacy and Security Policy**

Your personal information will be used for Electronic Funds Transfer/church business only, will not be sold, leased or otherwise used for any other purpose. GFTS takes reasonable precautions to protect the personal information on individuals collected or maintained by GFTS against loss, unauthorized access, and illegal use or disclosure. GFTS protects the security of personal information during transmission by using industry-standard cryptographic technology such as Secure Sockets Layer. Personal information is stored in secure locations. GFTS staff is trained on procedures for the release of information and the information is not shared with unaffiliated third parties. GFTS conducts periodic audits to ensure that proper information management policies and procedures are being followed.

- **Please note that the electronic debit will appear on your bank or credit card statement as “GFTS LLC”.**
- **You may return this completed form by mail, placing it in a *sealed envelope* in the collection basket or dropping it off at the rectory office.**

**God Bless you and thank you for  
your generous support of St. Anthony Parish.**