

# ELECTRONIC GIVING

## NEW ENROLLMENT

### Messiah Lutheran Church

Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### AMOUNT

\$\_\_\_\_\_ Weekly on Monday

\$\_\_\_\_\_ Semi-monthly (1st and 15th)

\$\_\_\_\_\_ Monthly on the 1st

\$\_\_\_\_\_ Monthly on the 15th

DATE OF FIRST DONATION: \_\_\_\_\_

### CREDIT OR DEBIT CARD

Please charge the monthly donation listed above to my (check one):

MasterCard       Visa       Discover

Account #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

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

### CHECKING ACCOUNT

Please attach a voided check.

### SAVINGS ACCOUNT

Please attach a deposit slip.

CHURCH ENVELOPE #: \_\_\_\_\_

I authorize Messiah Lutheran Church 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.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

*Place in offering plate, deliver to church office or send via mail.*

# CHANGE EXISTING ELECTRONIC GIFT

### Messiah Lutheran Church

Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### AMOUNT

Current giving amount: \$\_\_\_\_\_ / month

New giving amount: \$\_\_\_\_\_ / month

START DATE: \_\_\_\_\_

I authorize Messiah Lutheran Church 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.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

### OTHER SPECIAL INSTRUCTIONS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please contact Kellen Bohn with any additional questions.  
(636) 926-9773 / [kbohn@messiahnetwork.org](mailto:kbohn@messiahnetwork.org)

*Place in offering plate, deliver to church office, or send via mail.*