

St. Brendan Church
4242 Brendan Lane
North Olmsted OH 44070
440-777-7222

Recurring Contribution Authorization Form

By completing & returning this form to the parish, you authorize regularly scheduled charges to your checking/savings account or credit card (Visa, MasterCard, American Express or Discover). A receipt for each payment will be emailed to you and the charge will appear on your bank statement as an "ACH Debit." You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from St. Brendan at least 10 days prior to the payment being collected.

If you select **Weekly** donations, your account will be charged the amount indicated below **every Friday**.
 If you select **Monthly** donations, your account will be charged the amount indicated below on the **10th of the month**.

Please complete the information below:

I _____ authorize **St. Brendan Church** to charge on a **Weekly / Monthly** basis my
 (full name) (please choose one)

bank account or credit card indicated below for \$ _____. My contribution will be allocated as follows:

\$ _____ Weekly/Sunday Collection \$ _____ Monthly Offering
 \$ _____ Offering for the Needy \$ _____ Parish Improvement Fund

Billing Address _____ Phone# _____
 City, State, Zip _____ Email _____
 Envelope # _____

Checking/Savings Account

Checking Savings
 Name on Acct _____
 Bank Name _____
 Account Number _____
 Bank Routing # _____
 Bank City/State _____



Credit Card

Visa MasterCard
 Amex Discover
 Cardholder Name _____
 Account Number _____
 Exp. Date _____
 CVV Code _____

SIGNATURE _____ DATE _____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify St. Brendan Church in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF) I understand that St. Brendan Church may at its discretion attempt to process the charge again within 30 days, and agree to an additional \$25.00 charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this credit card/bank account and will not dispute these scheduled transactions with my bank or credit card company; so long as the transactions correspond to the terms indicated in this authorization form. **St. Brendan will not share your information with anyone.**