

ENROLLMENT FORM



Our Lady of the Lake Catholic Church
203 Vaughn Drive
Branson, MO 65616

To enroll online, use code
below or scan here: →

MO447



AI

Faith Direct • Attention: Enrollment • P.O. Box 7101 • Merrifield, VA 22116-7101 • 1-866-507-8757 {toll free} • www.faithdirect.net

Process my gifts on the: 4th *or* 15th of the month *(please check only one box)*

(Note: The total Weekly Offertory amount will be determined by the number of Sundays in the month. Some months have 5 Sundays.)

Weekly Offertory Gift: \$ _____

You may also choose to give to the following second and special collections.

The amount indicated will be debited in the month listed as part of the regular monthly transaction.

COLLECTION	AMOUNT	MONTH	COLLECTION	AMOUNT	MONTH
<input type="checkbox"/> Vision 2020 Collection	\$ _____	Monthly	<input type="checkbox"/> Catholic Communications	\$ _____	June
<input type="checkbox"/> Solemnity of Mary	\$ _____	January	<input type="checkbox"/> Peter's Pence	\$ _____	June
<input type="checkbox"/> Church in Latin America	\$ _____	January	<input type="checkbox"/> Feast of the Assumption	\$ _____	August
<input type="checkbox"/> Support <i>The Mirror</i> Newspaper	\$ _____	February	<input type="checkbox"/> Retirement Fund for Religious	\$ _____	September
<input type="checkbox"/> Ash Wednesday	\$ _____	February	<input type="checkbox"/> Mission Sunday	\$ _____	October
<input type="checkbox"/> Catholic Home Missions	\$ _____	February	<input type="checkbox"/> All Saints Day	\$ _____	November
<input type="checkbox"/> Easter Flowers *	\$ _____	March	<input type="checkbox"/> All Souls *	\$ _____	November
<input type="checkbox"/> Church Central & Eastern Europe	\$ _____	March	<input type="checkbox"/> Catholic Charities of Southern Missouri	\$ _____	November
<input type="checkbox"/> Support <i>The Mirror</i> Newspaper	\$ _____	March	<input type="checkbox"/> Christmas Flowers *	\$ _____	December
<input type="checkbox"/> Catholic Relief Services	\$ _____	March	<input type="checkbox"/> Immaculate Conception	\$ _____	December
<input type="checkbox"/> Good Friday	\$ _____	March	<input type="checkbox"/> Seminary & Retired Priests	\$ _____	December
<input type="checkbox"/> Easter Sunday	\$ _____	March	<input type="checkbox"/> Christmas/Gift for the Pastor	\$ _____	December
(In addition to regular Sunday gift)	\$ _____	March			
<input type="checkbox"/> Ascension	\$ _____	May			

* Forms will be available in the church (or call the parish office) to indicate the names of your dedications/intentions for these collections.

I would like to enroll in the Faith Direct program. I understand that my **total** monthly contribution amount will be transferred directly from my bank account or credit/debit card as stated above, a record of my gifts will appear on my bank or card statement, and my transfers will begin next month. I understand that I can increase, decrease or suspend my giving by contacting Faith Direct toll free at 1-866-507-8757. {All gifts provided to your Church originating as Automated Clearing House transactions comply with U.S. law.}

Signature: X _____ **Date:** _____

Name(s): *(please print)* _____
Street Address: _____
City/State/Zip Code: _____
Telephone: _____ E-mail: _____

Church Envelope #: _____

Name as I/we would like it to appear on Offertory Cards: _____
 I do not wish to receive Offertory Cards to place in the collection basket as a sign of my electronic giving.

If you choose to enroll by mail, you can contact Faith Direct at 1-866-507-8757 {toll-free} to set up online access to your account.

For Bank Account Debit: Please return this completed form and a voided check to Faith Direct Enrollment.

For Credit/Debit Card: Please complete the following... VISA MasterCard American Express Discover

Credit/Debit Card #: _____ Expiration Date: _____

If you have any questions about the Faith Direct program, please contact us at 1-866-507-8757 {toll free} or info@faithdirect.net.