

*you're in good hands*

**Request and Authority to debit the credit card account named below to pay *the Parish of St Paul of the Cross***

**Request and Authority  
to debit credit card  
account**

**Name** \_\_\_\_\_

**Address**  
\_\_\_\_\_

**Email** \_\_\_\_\_

Request and authorise *the Parish of St Paul of the Cross* to debit my credit card account as detailed below to pay our/my wedding/baptism fee. This authority remains in force until the fee has been received by Parish of St Paul of the Cross.

**Insert details of credit  
card account to be  
debited OR pay via  
EFT. If paying via EFT  
please use your name  
and date of sacrament  
as a Reference.**

**Name of  
cardholder** \_\_\_\_\_

**Type of credit card**    **Mastercard/ VISA / Bankcard**

**Account number**    |\_|\_|\_|\_|\_|\_|\_|\_| |\_|\_|\_|\_|\_|\_|\_|\_| |\_|\_|\_|\_|\_|\_|\_|\_| |\_|\_|\_|\_|\_|\_|\_|\_|

**Expiry Date**        |\_|\_|\_|\_| - |\_|\_|\_|\_|

**CVV**                  |\_|\_|\_|\_|\_|

**EFT DETAILS**

**Name: Glen Osmond Parish**  
**Bank: CDF (National Aust Bank)**  
**BSB: 085:005**  
**A/c No: 487121356**

**Debit Amount**

The one-off deduction will occur on the first Wednesday of this Form being received in the Parish Office

The amount to be debited is        \$ |\_|\_|\_|\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|

**(Amount in words)**

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

**Insert your signature**

**Signature** \_\_\_\_\_

**Date**                  \_\_\_ / \_\_\_ / \_\_\_

**Couple or child's name** \_\_\_\_\_

**FOR OFFICE USE ONLY:**

**New Agreement**

**Date of Sacrament:** \_\_\_\_\_

**Date Received:** \_\_\_\_\_    **Date Actioned:** \_\_\_\_\_

**Staff member (actioned by):** \_\_\_\_\_