

# ENROLLMENT FORM



St. Louise de Marillac Catholic Church  
320 McMurray Road  
Pittsburgh, PA 15241

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

PA27



A5

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

**Weekly Offertory Gift: \$** \_\_\_\_\_

*(Note: Your gifts will be processed on the 4th or the next business day of each month. The total Weekly Offertory amount will be determined by the number of Sundays in the month. Some months have 5 Sundays.)*

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"/> St. Anthony School Programs/DePaul School for Hearing and Speech	\$ _____	January	<input type="checkbox"/> Catholic Communications & Catholic University of America	\$ _____	August
<input type="checkbox"/> Solemnity of Mary, Mother of God	\$ _____	January	<input type="checkbox"/> Bishop's Education Fund	\$ _____	September
<input type="checkbox"/> Tuition Assistance Angel Fund	\$ _____	January	<input type="checkbox"/> World Mission Sunday	\$ _____	October
<input type="checkbox"/> Ash Wednesday	\$ _____	February	<input type="checkbox"/> Retirement Fund for Religious	\$ _____	November
<input type="checkbox"/> Easter Flowers *	\$ _____	March	<input type="checkbox"/> Thanksgiving Food Drive	\$ _____	November
<input type="checkbox"/> Catholic Campaign for Human Development/Missions	\$ _____	March	<input type="checkbox"/> All Saints	\$ _____	November
<input type="checkbox"/> Lenten Food Drive	\$ _____	March	<input type="checkbox"/> Christmas Flowers*	\$ _____	November
<input type="checkbox"/> Palm Sunday (additional gift)	\$ _____	March	<input type="checkbox"/> Christmas Charities for Children and Youth	\$ _____	December
<input type="checkbox"/> Holy Land	\$ _____	March	<input type="checkbox"/> Immaculate Conception	\$ _____	December
<input type="checkbox"/> Easter Sunday (additional gift)	\$ _____	April	<input type="checkbox"/> Christmas	\$ _____	December
<input type="checkbox"/> Catholic Relief Services	\$ _____	May	<input type="checkbox"/> School Support	\$ _____	Monthly
<input type="checkbox"/> Ascension Thursday	\$ _____	May	<input type="checkbox"/> Parish Share	\$ _____	Monthly
<input type="checkbox"/> Peter's Pence	\$ _____	June			
<input type="checkbox"/> Assumption	\$ _____	August			

\* Please notify the church of the names of your 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.