

ENROLLMENT FORM



St. Anthony
110 Anchor Avenue
Oceanside, NY 11572

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

IP

NY581



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: Total contribution amount will be debited on the 4th of the month or the next business day. The total 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"/> Solemnity of Mary	\$ _____	January	<input type="checkbox"/> Assumption	\$ _____	August					
<input type="checkbox"/> Church in Need	\$ _____	February	<input type="checkbox"/> Catholic University	\$ _____	September					
<input type="checkbox"/> Ash Wednesday	\$ _____	February	<input type="checkbox"/> St. Pius X Enriched Living Facility	\$ _____	September					
<input type="checkbox"/> Catholic Relief Services	\$ _____	March	<input type="checkbox"/> Respect Life	\$ _____	October					
<input type="checkbox"/> Holy Land	\$ _____	April	<input type="checkbox"/> World Mission Sunday	\$ _____	October					
<input type="checkbox"/> Easter Sunday	\$ _____	April	<input type="checkbox"/> All Souls	\$ _____	November					
(In addition to regular Sunday gift)	\$ _____	April	<input type="checkbox"/> All Saints	\$ _____	November					
<input type="checkbox"/> Catholic Elementary Schools	\$ _____	May	<input type="checkbox"/> Catholic Campaign for Human	\$ _____	November					
<input type="checkbox"/> Catholic Communications	\$ _____	May	Development/Home Missions	\$ _____	November					
<input type="checkbox"/> Ascension	\$ _____	June	<input type="checkbox"/> Support the Long Island Catholic	\$ _____	December					
<input type="checkbox"/> Religious Retirement	\$ _____	June	<input type="checkbox"/> Immaculate Conception	\$ _____	December					
<input type="checkbox"/> Peter's Pence	\$ _____	June	<input type="checkbox"/> Christmas	\$ _____	December					
<input type="checkbox"/> Youth Ministry	\$ _____	January	\$ _____	April	\$ _____	October				
<input type="checkbox"/> Lawn & Grounds	\$ _____	April	\$ _____	June	\$ _____	August	\$ _____	September		
<input type="checkbox"/> Fuel Offering	\$ _____	January	\$ _____	February	\$ _____	March	\$ _____	November	\$ _____	December

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.