

**Christ the King Catholic Church**  
 1900 Meadowood St.  
 Sarasota, FL. 34231  
 (941) 924-2777

**Recurring Payment Plan Authorization Form  
 Bank Account or Credit Card**

Schedule your payment to be automatically deducted from your checking account, or charged to your Visa, MasterCard, or Discover Card.

**The Recurring Payment Plan will help you in several ways:**

- It's convenient (saving you time and postage)
- Your payment is always on time (even if you're out of town), eliminating late charges
- It's easy to sign up

**Here's how the Recurring Payment Plan works:**

You authorize regularly scheduled charges to your checking/savings account or credit card. You will be charged each month the total amount you desire to contribute, on the date that you choose. A receipt of payment will be emailed to you and will appear on your statement.

**Please complete the following information below:**

I \_\_\_\_\_ authorize Christ the King Catholic Church to charge/debit my account on  
(Name)  
 the \_\_\_\_\_ of each month for payment of my contribution.  
(Date of Transaction)

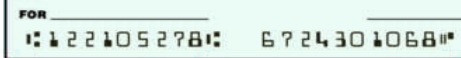
Offertory Amount: \$ \_\_\_\_\_

Billing Address \_\_\_\_\_

Phone# \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_

<b>Checking/Savings Account</b>	<b>Credit Card</b>
<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover
Name on Acct: _____	Cardholder Name: _____
Bank Name: _____	Account Number: _____
Account Number: _____	Exp. Date: _____
Bank Routing #: _____	CVV (3 digit number on back of card): _____
Bank City/State: _____	
 <small>FOR</small> <small>⑆ 22105278⑆ 6724301068⑆</small> <small>Routing Number                      Account Number</small>	

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

I agree to notify the business in writing of any changes in my account information or termination of this authorization 15 days prior to the next due date of the charges. For ACH debits to my checking/savings account, I understand that because this is an electronic transaction, these funds may be withdrawn from my account each month as soon as the above noted transaction date. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I will not dispute the company's recurring billing with my bank or credit card company; so long as the transaction corresponds to the terms indicated in this agreement.