

ENROLLMENT FORM



St. Polycarp Roman Catholic Church
 55 Ransom Lane
 Smyrna, DE 19977

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

DE831



MI

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)

Weekly Offertory Gift: \$ _____ (Note: 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, special and diocesan collections. The amount indicated will be debited in the month listed.

COLLECTIONS (Holy Days italicized bold)	AMOUNT	MONTH	COLLECTIONS (Holy Days italicized bold)	AMOUNT	MONTH
<input type="checkbox"/> Parish Utilities (Jan, Mar, Jul, Sept)	\$ _____	4 Months	<input type="checkbox"/> Christmas Flowers*	\$ _____	December
<input type="checkbox"/> Parish Maintenance (Apr, Jun, Aug, Oct)	\$ _____	4 Months	<input type="checkbox"/> Christmas Novena*	\$ _____	December
<input type="checkbox"/> Poor Box	\$ _____	Monthly	<input type="checkbox"/> Immaculate Conception	\$ _____	December
<input type="checkbox"/> New Year's Solemnity	\$ _____	January	<input type="checkbox"/> Christmas	\$ _____	December
<input type="checkbox"/> Parish School of Religion	\$ _____	January	DIOCESAN COLLECTIONS		
<input type="checkbox"/> Ash Wednesday	\$ _____	March	<input type="checkbox"/> Catholic University & Communication	\$ _____	January
<input type="checkbox"/> Easter Mass Remembrance*	\$ _____	March	<input type="checkbox"/> Black, Indian & Home Missions	\$ _____	February
<input type="checkbox"/> Easter Flowers*	\$ _____	March	<input type="checkbox"/> Catholic Relief & Latin America	\$ _____	March
<input type="checkbox"/> Parish School of Religion	\$ _____	April	<input type="checkbox"/> Rice Bowl	\$ _____	April
<input type="checkbox"/> Easter (In addition to Sunday gift)	\$ _____	April	<input type="checkbox"/> Holy Land Shrines	\$ _____	April
<input type="checkbox"/> Mother's Day Mass Remembrance*	\$ _____	April	<input type="checkbox"/> Priests Retirement	\$ _____	May
<input type="checkbox"/> Feast of Ascension (In addition to Sunday gift)	\$ _____	May	<input type="checkbox"/> Works of the Holy Father	\$ _____	June
<input type="checkbox"/> Father's Day Mass Remembrance*	\$ _____	June	<input type="checkbox"/> Basilica of the National Shrine	\$ _____	July
<input type="checkbox"/> Feast of Assumption	\$ _____	August	<input type="checkbox"/> Cathedral of St. Peter	\$ _____	August
<input type="checkbox"/> Parish School of Religion	\$ _____	September	<input type="checkbox"/> Share in the Spirit	\$ _____	September
<input type="checkbox"/> All Souls Day Remembrance*	\$ _____	October	<input type="checkbox"/> World Mission Sunday	\$ _____	October
<input type="checkbox"/> All Saints Day	\$ _____	November	<input type="checkbox"/> Human Development	\$ _____	November
<input type="checkbox"/> Thanksgiving - St. Vincent de Paul	\$ _____	November	<input type="checkbox"/> Religious Retirement	\$ _____	December

* Call the parish office at (302) 653-8279 or email us at office@saintpolycarp.org to give the names of your dedications or 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.