

THE GOD-SHAPED LIFE

YES...I/we want to partner in supporting the following exciting Special Project(s):

- | | |
|--|---|
| \$ _____ Full-Time Children's Ministry Staff | \$ _____ Our Church / Our Ministry |
| \$ _____ Parent's Room Fit-Out | \$ _____ Tax Deductible Giving Accounts |
| \$ _____ Ministry Housing | \$ _____ Missions – Fistula Surgery |

I/we would like to make my/our one-off financial commitment, with God's help through: (please tick)

- | | |
|---|--|
| <input type="checkbox"/> Cash / cheque in envelope | <input type="checkbox"/> Credit / Debit Card (please complete details below) ↓ |
| <input type="checkbox"/> Direct Debit (please complete details below) ↓ | <input type="checkbox"/> Internet Banking/Direct Deposit (Bank details available in Brochure and Church Bulletin. Description is the project nominated.) |

Special Project One-off Payment Authority

Name on Card or Account:

Date: ___ / ___ / 09

Signature:

Amount:

\$

Please complete either Credit Card or Bank Account details below ↓

CREDIT CARD DETAILS:

Visa MasterCard

Expiry: /

Credit Card Number:

BANK ACCOUNT DETAILS:

Financial Institution:

Account Number:

BSB Number:

THE GOD-SHAPED LIFE

YES...I/we want to partner in the break-through ministry of this church as we show God's love and truth during 2010.

Name/s _____ Email: _____

Phone number _____

With God's help, my/our WEEKLY tithe for the coming 12 months will be:

- | | | | | | | | |
|--------------------------------|--------------------------------|--------------------------------|--------------------------------|-------------------------------|-------------------------------|-------------------------------|--|
| <input type="checkbox"/> \$750 | <input type="checkbox"/> \$300 | <input type="checkbox"/> \$200 | <input type="checkbox"/> \$125 | <input type="checkbox"/> \$90 | <input type="checkbox"/> \$60 | <input type="checkbox"/> \$40 | <input type="checkbox"/> \$10 |
| <input type="checkbox"/> \$500 | <input type="checkbox"/> \$250 | <input type="checkbox"/> \$175 | <input type="checkbox"/> \$115 | <input type="checkbox"/> \$80 | <input type="checkbox"/> \$55 | <input type="checkbox"/> \$35 | <input type="checkbox"/> \$5 |
| <input type="checkbox"/> \$400 | <input type="checkbox"/> \$225 | <input type="checkbox"/> \$150 | <input type="checkbox"/> \$110 | <input type="checkbox"/> \$70 | <input type="checkbox"/> \$50 | <input type="checkbox"/> \$20 | <input type="checkbox"/> Other amount \$ _____ |

I/we would like to make my/our tithe through: (please tick)

- | | |
|---|--|
| <input type="checkbox"/> Cash / cheque in envelope | <input type="checkbox"/> Credit / Debit Card (please complete details below) ↓ |
| <input type="checkbox"/> Direct Debit (please complete details below) ↓ | <input type="checkbox"/> Internet Banking/Direct Deposit (Bank details available in Brochure and Church Bulletin.) |

Regular Weekly Offering / Tithe Authority (not one-off special authority)

Name on Card/Acc: Sign: Commence: ___ / ___ /09

Credit Card Details:

Visa MasterCard

Credit Card Number:

Expiry: /

Direct Debit Bank Account Details:

Financial Institution:

BSB Number:

Account Number:

PLEASE NOTE: Credit Card and Direct Debit Transactions will be processed on the 1st day each month