

Joining Jesus Campaign for St. Andrew's Episcopal Church, Madison

Yes! I/We wish to help ensure St. Andrew's continues to serve in God's mission.

Please accept my/our gift as part of the *Joining Jesus* campaign for St. Andrew's Episcopal Church.

Name: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

PLEDGE PAYMENT DETAILS

A payment in the amount of \$ _____ is enclosed as an initial payment. (Made payable to *The Episcopal Church in Connecticut* with *Joining Jesus* in the memo.)

I would like to make a gift of stock or make a qualified charitable distribution using my IRA. Please send me information.

I would like to designate the church as a beneficiary of life insurance assets or include the church in my estate. Please send me information.

I would like to make a recurring payments via credit/debit card. *Please complete section on back.*

I would like to establish automatic checking or savings account debits. *Please complete section on back.*

GIFT RECOGNITION

(no donation amounts or giving levels will be published):

This commitment is made in celebration/honor of
_____.

I/we prefer our name not be listed in the alphabetical roll of donors to the campaign.

Please list my/our name in any printed materials as: _____

Joining Jesus CAMPAIGN PLEDGE

I/we pledge to support the *Joining Jesus* campaign in the total amount of

\$ _____

To fulfill this pledge, payments will be made:

Annually Quarterly Monthly

over the next 1 2 3 4 5 (circle one) years beginning on ____/____/_____.

Please send me reminders:

At year end Quarterly Monthly

By signing below, I/we commit to fulfilling this campaign pledge according to the schedule outlined in this form. I/we understand that this pledge may be prepaid at any time.

Signature:

Signature:

Today's Date:

Joining Jesus Campaign for St. Andrew's Episcopal Church, Madison

Payment Method

Credit/Debit Card: Visa MasterCard American Express Discover

Credit/Debit Acct #: _____

Exp. Date: _____/_____

OR

ACH: Bank Name: _____

Routing Number: _____

Account Number: _____

Please complete:

Card/Account Holder Name: _____

Signature: _____