

PLEASE COMPLETE THE FORM IN FULL

2023/2024 PLANNED GIVING FORM

NEW TO PARISH

Name & Surname:		Existing Env #	
Address:			
Contact No:	Cell No:		
I/We would like to make this of this coming year 2023/202		Parish of the Resurrection, Table Vientribution R	
I/We would like to pay this: \	Weekly Mont	thly Annually Please tick box.	
I/We would like to pay this:			
Weekly Envelopes	EFT / Debit Ord	der	
financial year. Recognizing th strive toward a goal of tithing	at everyone's sit 10% to the Lord elkbos, 2% to the	f your commitment to the parish this tuation is different, we ask you to d. A good guideline along the way be Archdiocese, and 3% to other	
PL	EASE COMPLE	TE BELOW	
No of members in your Family: No adults that received Baptism/C		ember of the Parish Yes / No	
No Adults working:	No Adults not	No Adults not working:	
No of Students at school:	No of students	No of students received Baptism/Communion:	
No of Students out of school (living	g at home):	(Working / Studying)	
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BANK DETAILS:

Bank: Standard Bank INO: Catholic Church of the Resurrection

Branch: Milnerton Account: 073253960 Ref: No or Name & Surname