

Church of the Ascension

ParishPay Enrollment Form

Name _____ Address _____ City, State, Zip _____ Phone _____	Please Debit My Account:	
	Regular Collection (monthly on the 5th)	\$ _____
	Special Collection (monthly on the 5th)	\$ _____
	Easter Collection	\$ _____
	Christmas Collection	\$ _____

Which Account Should We Debit?

I want to use a Credit Card

VISA MasterCard Amex Discover

Account #: _____ Expiration Date: _____ / _____

or

I want to use a Bank Account

9-Digit Routing #: _____

Checking Account Savings Account

Account #: _____