

Date: _____ Parish: _____

Name on Card: _____

Billing Address: _____

Debit Credit

Card Number: _____

Exp. Date: _____ Month _____ Year 3-Digit Security Code: _____

Amount: _____ Card Type: Visa MC American Express Discover

Authorization Signature: _____

Department: Christian Formation
 Ministry Formation
 Eucharistic Congress



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