

# ENROLLMENT FORM



St. Mary of the Falls Church  
25615 Bagley Road  
Olmsted Falls, OH 44138

To enroll online, use code  
below or scan here: →

OH445



Faith Direct • Attention: Enrollment • P.O. Box 7101 • Merrifield, VA 22116-7101 • 1-866-507-8757 (toll free) • www.faithdirect.net

Process my gifts on the:  4th or  15th of the month (please check only one box)

Weekly Offertory Gift: \$ \_\_\_\_\_

(Note: The total Weekly Offertory amount will be determined by the number of Sundays in the month. Some months have 5 Sundays.)

You may also choose to give to the following second and special collections.  
The amount indicated will be debited in the month listed as part of the regular monthly transaction.

COLLECTION	AMOUNT	MONTH	COLLECTION	AMOUNT	MONTH
<input type="checkbox"/> Improvement Fund	\$ _____	Monthly	<input type="checkbox"/> Peter's Pence (for the Holy Father)	\$ _____	June
<input type="checkbox"/> Mary, Mother of God	\$ _____	January	<input type="checkbox"/> School Education Fund	\$ _____	July
<input type="checkbox"/> Diocesan Assessment	\$ _____	January	<input type="checkbox"/> Assumption	\$ _____	August
<input type="checkbox"/> School Education Fund	\$ _____	February	<input type="checkbox"/> Faith & Values Appeal for Education	\$ _____	August
<input type="checkbox"/> Church in Latin America	\$ _____	February	<input type="checkbox"/> Diocesan Assessment	\$ _____	September
<input type="checkbox"/> Diocesan Assessment	\$ _____	March	<input type="checkbox"/> School Education Fund	\$ _____	October
<input type="checkbox"/> Holy Land (Good Friday)	\$ _____	March	<input type="checkbox"/> Mission Sunday	\$ _____	October
<input type="checkbox"/> Easter Sunday (In addition to regular Sunday gift.)	\$ _____	March	<input type="checkbox"/> All Saints	\$ _____	November
<input type="checkbox"/> Catholic Home Missions	\$ _____	April	<input type="checkbox"/> Campaign for Human Development	\$ _____	November
<input type="checkbox"/> School Education Fund	\$ _____	May	<input type="checkbox"/> Immaculate Conception	\$ _____	December
<input type="checkbox"/> Newman Campus (Catechetical Services)	\$ _____	May	<input type="checkbox"/> Retirement Fund for Religious	\$ _____	December
<input type="checkbox"/> Ascension	\$ _____	May	<input type="checkbox"/> Christmas	\$ _____	December
<input type="checkbox"/> Diocesan Assessment	\$ _____	June			

I would like to enroll in the Faith Direct program. I understand that my total monthly contribution amount will be transferred directly from my bank account or credit/debit card as stated above, a record of my gifts will appear on my bank or card statement, and my transfers will begin next month. I understand that I can increase, decrease or suspend my giving by contacting Faith Direct toll free at 1-866-507-8757. [All gifts provided to your Church originating as Automated Clearing House transactions comply with U.S. law.]

Signature: X \_\_\_\_\_ Date: \_\_\_\_\_

Name(s): (please print) \_\_\_\_\_

Street Address: \_\_\_\_\_

Church Envelope #: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name as I/we would like it to appear on Offertory Cards: \_\_\_\_\_

I do not wish to receive Offertory Cards to place in the collection basket as a sign of my electronic giving.

If you choose to enroll by mail, you can contact Faith Direct at 1-866-507-8757 (toll-free) to set up online access to your account.

**For Bank Account Debit:** Please return this completed form and a voided check to Faith Direct Enrollment.

**For Credit/Debit Card:** Please complete the following...  VISA  MasterCard  American Express  Discover

Credit/Debit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

If you have any questions about the Faith Direct program, please contact us at 1-866-507-8757 (toll free) or info@faithdirect.net.