



AUTHORIZATION FOR CREDIT CARD PAYMENTS

Pledge Year 2021

To begin Credit Card payments or to renew/update your credit card information please complete the form below. By completing this form, you are authorizing Christ Church to process a debit to your credit card as noted below.

Card Holder Name as it appears on Card.		
Credit Card Number	Exp Date	Security Code
I would like my credit card to be debited on <input type="checkbox"/> Monthly on _____ Day of Month <input type="checkbox"/> Weekly on _____ (day of week) <input type="checkbox"/> Quarterly: Feb 15th, May 15th, August 15, Nov 15th <input type="checkbox"/> Other _____ Please provide detail		
Print Name:	Phone Number:	
Authorized Signature:	Date Signed:	
Reason for Payment: Unrestricted Gift to Christ Church Grosse Pointe	Amount: <input style="width: 50px; height: 20px;" type="text"/>	

Please return this form to:
Christ Church Grosse Pointe Business Office:
Diane Ward
dward@christchurchgp.org
61 Grosse Pointe Boulevard
Grosse Pointe Farms, MI 48236