

*Saint Isidore Parish*  
**Electronic Funds Transfer - Sign up document**

Name: \_\_\_\_\_

Address: City: Phone: E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Please check your EFT preference below.

My New Offering Transferred Monthly on the 15th	My New Annual Gift:
<input type="checkbox"/> \$100 .....	\$1,200
<input type="checkbox"/> \$125 .....	\$1,500
<input type="checkbox"/> \$150 .....	\$1,800
<input type="checkbox"/> \$175 .....	\$2,100
<input type="checkbox"/> \$200 .....	\$2,400
<input type="checkbox"/> \$225 .....	\$2,700
<input type="checkbox"/> \$250 .....	\$3,000
<input type="checkbox"/> \$350 .....	\$4,200
<input type="checkbox"/> \$400 .....	\$4,800
<input type="checkbox"/> \$500 .....	\$6,000
<input type="checkbox"/> \$667 .....	\$8,000
<input type="checkbox"/> \$833 .....	\$10,000
<input type="checkbox"/> \$ _____ .....	\$ Other _____

\*\*I/We authorize St. Isidore's to debit our bank account in accordance with these instructions indicated above until further notice.

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

**Please attach a copy of a voided check here and return to us in the enclosed stamped envelope.**

Saint Isidore Parish  
 429 Great Road  
 Stow, MA 01775-1101