Stella Maris Parish

PAR (PRE-AUTHORIZED REMITTANCE) FORM

Thank you for your commitment to support the mission of Jesus Christ through PAR at Stella Maris Parish.

IMPORTANT: Your **Envelope #**: _____
(Note: 30 days' notice required for changes.)

I, _____ (**insert full name**), hereby authorize Stella Maris Parish to automatically withdraw from my bank account as follows:

The amount of $ _____ is to be taken (**please choose only one**):

- ☐ **Monthly (12 payments) or**
- ☐ **Bi-weekly (26 payments) or**
- ☐ **Weekly (52 payments)** for an annual contribution of **$** _____ , starting on the _____ day of the month of _____, in the year _____ .

(Note: Start date cannot be in the current month.)

Important: Please attach a sample cheque marked "VOID", or take a picture and email it to operations@stellamarishalifax.com. My mailing address and telephone number, and email address if different from my sample cheque:

Address: _____

Phone: _____ Email: _____

I have read and agree to the following five notes:

1. This donation is made on behalf of me as an individual donor. All amounts are payable to Stella Maris Parish and are drawn on or directed to you by my current financial institution on behalf of Stella Maris Parish. Any delivery of this authorization to you constitutes delivery by the undersigned.
2. Your treatment of each debit shall be the same as if the undersigned has personally directed you to pay as indicated and to charge the amount specified above to the account of the undersigned.
3. I acknowledge that a PAR transaction may be disputed by me if the PAR transaction was not drawn in accordance with my authorization and that I have 90 calendar days to make a declaration to my financial institution in order to make a claim for an incorrect transaction.
4. I may revoke my authorization at any time, subject to providing notice within 30 calendar days to Stella Maris Parish office. I understand I may also obtain a sample cancellation form or for more information on my right to cancel with pre-authorized debit agreement, I may contact my financial institution or visit: www.cdnpay.ca.
5. I may contact Stella Maris Parish, 14 St. Michael's Avenue, Halifax, NS B3P 1M5, Phone 902-477-3530, email operations@stellamarishalifax.com or visit: www.stellamarishaifax.com.

Date: _____ X _____
Signature as you would sign your cheque

Stella Maris Parish

ALL ABOUT PAR (PRE-AUTHORIZED REMITTANCE)

a. Similar to regularly authorized debits to your bank account such as: power, cable, telephone, insurance premiums and mortgage payments, this is a safe, secure, accurate and automatic process and is found to be very convenient to many parishioners.
b. You authorize the amount and frequency of your offering, which can be changed or cancelled by you by contacting our parish office in writing.
c. You will still receive personalized numbered envelopes for special collections. We encourage you to pick up a card from the basket at the back of the church and place it in the regular Sunday collection basket. This allows you to continue to participate in the Sunday worship offering.
d. PAR is not set up to replace the "special collection envelopes" such as Vocations, Christmas or Easter, etc. We encourage you to please continue to use these special collection envelopes by enclosing your cheque or cash. Alternatively, you can give by etransfer to these special collections at giving@stellamarishalifax.com. Please include the name of the collection in the memo line.
e. Confidentiality is always foremost when it comes to our parishioners, and in particular in relation to their finances. All church offerings are handled by a limited number of volunteers on a strictly private and confidential basis. The parish will not use or share your information for any other purpose.
f. The chart below may assist you, along with your prayerful consideration, as to the amount of your regular Sunday offering:

Annual Household Income	**Suggested Weekly Gift to Parish (rounded to nearest $ amount)**			
	1%	**3%**	**5%**	**10%**
$10,000	2	6	10	19
$15,000	3	9	14	29
$20,000	4	12	19	38
$25,000	5	14	24	48
$30,000	6	17	29	58
$35,000	7	20	34	67
$40,000	8	23	38	77
$50,000	10	29	48	96
$60,000	12	35	58	115
$70,000	13	40	67	135
$80,000	15	46	77	154
$90,000	17	52	87	173
$100,000	19	58	96	192
$120,000	23	69	115	231
$150,000	29	87	144	288

To begin using PAR, please complete this form and send it with a void cheque to operations@stellamarishalifax.com. You will receive a notification confirming it has been received and set up. If you have any questions, you can direct them to operations@stellamarishalifax.com.