

Caboolture Catholic Parish

Beerburrum Road, Caboolture QLD 4510

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ARCHDIOCESAN
DEVELOPMENT
FUND

AUTHORITY FOR RECURRENT PAYMENT BY CREDIT CARD

Action (Please tick): New request Alteration Cancellation

Surname: _____ Name: _____

Address: _____ Postcode: _____

SECTION 1 – CARD DETAILS (ALL DETAILS MUST BE SUPPLIED)

Type of Card (Please tick): VISA MASTERCARD

Cardholder Name (As appears on card): _____

Card Number: _____

Expiry Date (dd/mm/yy): / /

Please black out this section after loading.

SECTION 2 – DESCRIPTION OF GOODS/SERVICES (FOR EXAMPLE, PLANNED GIVING)

SECTION 3 – PAYMENT DETAILS:

\$ _____

Payment Frequency (Please tick): Fortnightly Monthly

First Payment Date (dd/mm/yy): / /

Final Payment Date (dd/mm/yy): **UNTIL FURTHER NOTICE**

SECTION 4 – AUTHORITY

I hereby authorise the Merchant to debit my Card Account with the amount and at the intervals specified above for goods/services as described. This authority shall stand, in respect of the above specified Card and in respect of any Card issued to me in renewal or replacement thereof, until I notify the Merchant in writing of its cancellation.

Cardholder's Signature: _____

Date: / / 20

PLEASE NOTE: Form to be retained for your records. Do not forward to ADF.

OFFICE USE ONLY Parish Reference Code: _____

CCParish 2016/1

ARCHDIOCESAN DEVELOPMENT FUND
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