

DONATION FORM

Personal Information

Name: _____

Organization: _____

Parish: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Phone: _____ Home Work Cell

E-mail: _____ Home Work

Privacy Notification - Personal information on this form is collected pursuant to the *Personal Information Protection and Electronic Documents Act* (PIPEDA). The information we collect is used to supply you with requested services for which you have given your consent and for statistical purposes except where otherwise provided by law. Your information will remain confidential, and will only be used or disclosed as authorized under the PIPEDA. Should you have any questions about the collection of information, please contact the diocese.

Email Opt In/Out I consent to receive the following information via email or mail as a stakeholder of the Roman Catholic Diocese of Calgary:

- All diocesan communications
- Faithfully (diocesan newsletter)
- Event Information
- Giving Opportunities
- Programs
- Do Not Contact

I understand I can opt out of these subscriptions at any time.

(internal use only) Raiser's Edge ID: _____ GL Code: _____ Soft Credit: _____

Gift Date: _____ (mm/dd/yyyy)

Gift Amount: _____ One Time Monthly Annual

Method of payment: Cash Cheque Credit Card

CREDIT CARD INFORMATION

(Note - a tax receipt can only be issued in the name of the credit card holder.)

Card Type: Visa MasterCard Amex

Card Holder Name: _____

Card Holder Signature: _____

Card Number: _____

Expiry Date: _____



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