



St. George Antiochian Orthodox Church

2011 Membership Form

General Contact Information – Please Print

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

Phone: _____ Cell: _____

Family Members:	Name	Email
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please use reverse side for additional names.

Pledge information

Step One: Choose a payment amount and method. Example: \$50 Monthly

Step Two: Calculate total payment. Example: \$50 per month x 12 = \$600

Monthly	Quarterly	Annually
\$ _____	\$ _____	\$ _____
X 12	X 4	X 1
\$ _____	\$ _____	\$ _____

Total pledge per year: \$ _____

Archdiocese Assessment @ 10%: \$ _____

Total Contributions: \$ _____

Credit Card Payment Option

AUTHORIZATION: Yes, I would like the convenience of automatic recurring billing through _____, 2011. By signing this form I authorize St. George Antiochian Orthodox Church to charge my account ___ **Monthly** ___ **Quarterly** ___ **Annually** in the amount of \$ _____ until I provide a written cancellation. Additionally, I would like to make an additional one time donation in the amount of \$ _____ to be charged immediately.

Signature: _____ **Date:** _____

___ **American Express** ___ **Discover** ___ **MasterCard** ___ **Visa**

Names as it appears on card: _____

Card billing address: _____

Card Number: _____

Expiration Date: _____