

# Pledge Form

“Preserving Our Past...  
Growing Our Faith...  
Building Our Future”



- New Pledge
- Renew Pledge

(Please print)

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ e-mail: \_\_\_\_\_

*I/We are pleased to provide a pledge/gift as follows:*

**TOTAL Amount of Pledge/Gift . . . . .** \$ \_\_\_\_\_

**Initial Payment .....** \$ \_\_\_\_\_

**Balance of .....** \$ \_\_\_\_\_

*I/We intend to pay the balance as follows:*

**1 Lump Sum Payment .....** \$ \_\_\_\_\_

**5 Annual Payments of .....** \$ \_\_\_\_\_

**10 Semi-Annual Payments of .....** \$ \_\_\_\_\_

**20 Quarterly Payments of .....** \$ \_\_\_\_\_

**60 Monthly Payments of .....** \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Payment Start Date: \_\_\_\_\_

envelope Number (optional): \_\_\_\_\_

- I/We are interested in more information about how to include St. Rita's Church in our will, trust, or as a beneficiary of our life insurance policy.
- I/We are interested in how to submit our pledge payment(s) using bill pay.

Please make checks payable to: **St. Rita's Building Fund**

*Please print Memorial Designation:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**This letter of intent is not a legal document. It or any subsequent payments may be amended.  
All gifts are tax-deductible. your pledge/gift will remain confidential.**

Please cut and fill it out.