



Pledge Card

Contact Information

Name: _____ Phone: _____

Address: _____

E-mail: _____

Pledge Details

Total Pledge Amount: \$ _____

Payment Amount and Frequency:

- ☐ Onetime gift of \$ _____ ☐ \$ _____ Monthly for _____ months
☐ \$ _____ Annually for _____ years ☐ Other: _____

Payment Method

- ☐ Monthly PAR (if new to PAR, please include a blank VOID cheque with this form)
☐ Cheque (payable to Metropolitan United Church)
☐ Etransfer to admin@metropolitanchurch.com; please include "Heat is On" in the message/memo box
☐ Credit Card (please contact Church office to set up)
☐ Other: _____

Alternative methods of giving are gratefully accepted, including gifts of capital, securities, or planned gifts.

Date: _____

Thank You! A charitable receipt will be issued annually by Metropolitan United Church for the gifts received in each year.