



### *Christ the Servant Lutheran Church*

After prayerful consideration and with gratitude and generosity, I (we) plan to:

- Pray regularly for the ministry of Christ the Servant Lutheran Church
- Attend worship services and invite others to worship
- Be available to follow God’s leading in working through our church
- Consider sharing my time, skills, experience and interest for ministry and service, including the following possibilities: (Only a partial list)
  - daily prayer for others
  - performing intentional acts of kindness
  - participating in Family Promise, Gardenview dinners or property maintenance
  - running the soundboard
  - serving as a worship assistant
  - helping with coffee hour fellowship
  - or something else where your skill aligns with a need.
  
- Plan to give \$\_\_\_\_\_ weekly or \$\_\_\_\_\_ monthly, as:
  - General Offering    \$\_\_\_\_\_
  - Other
    - \_\_\_\_\_ \$\_\_\_\_\_
    - \_\_\_\_\_ \$\_\_\_\_\_

Name (please print) \_\_\_\_\_

If you are interested in on-line giving, please consider “Simply Giving”.

Please complete the back page.

# Authorization Form

The **Simply Giving** Program

endorsed by

 Thrivent Federal Credit Union

<b>FOR OFFICE USE ONLY</b>	<b>DONOR #</b>	<b>DATE</b>
Name of Church <u>Christ the Servant Lutheran Church</u>		
Effective Date of Authorization _____/_____/_____		
Type of Authorization Form: <input type="checkbox"/> New Authorization <input type="checkbox"/> Change Banking Information <input type="checkbox"/> Change Donation Amount <input type="checkbox"/> Discontinuing Electronic Donation <input type="checkbox"/> Change Donation Date		
Last Name		First Name
Address		
City	State	Zip
Email Address		
Please debit my donation from my (check one): <input type="checkbox"/> Checking Account (attach a voided check below) <input type="checkbox"/> Savings Account (contact your financial institution for Routing #)		Routing Number: _____ Valid Routing # must start with 0, 1, 2, or 3.  Account Number: _____
<b>Date of First Donation:</b>  _____/_____/_____	<b>FREQUENCY OF DEBIT:</b> <input type="checkbox"/> Monthly on the 1st <input type="checkbox"/> Monthly on the 15th <input type="checkbox"/> Monthly on the 20th <input type="checkbox"/> One Time Special Instructions: _____ _____	<b>FUNDS AND DONATION AMOUNTS:</b> <input type="checkbox"/> General Fund \$ _____ <input type="checkbox"/> _____ \$ _____ <input type="checkbox"/> _____ \$ _____ <input type="checkbox"/> _____ \$ _____ <input type="checkbox"/> _____ \$ _____ <input type="checkbox"/> _____ \$ _____ <div style="text-align: right;">                     Total per debit \$ _____                      Total per month \$ _____                 </div>
<b>AGREEMENT</b>		
I authorize the above church to process debit entries to my account. I understand that this authority will remain in effect until the last debit date listed above or until I provide reasonable notification to terminate the authorization.		
Authorized Signature: _____		Date: _____

Please attach voided check here.