

**Parishioner Authorization Form for Electronic Giving**

St. Joseph the Worker Parish  
Orefield, PA

Participants Name: \_\_\_\_\_  
\_\_\_\_\_

Envelope # \_\_\_\_\_

Type of Account (check one)

Checking Acct: \_\_\_\_\_ (attach a voided check)

If there are 2 names on the check, we need 2 signatures on the form for authorization

Savings Acct: \_\_\_\_\_ (attach bank deposit slip)

Church Contributions (add amount and circle your frequency choice):

Regular Collection: \$ \_\_\_\_\_ Weekly or Monthly on the 1<sup>st</sup> or 16<sup>th</sup>

Holy days \$ \_\_\_\_\_

There are 7 Holy Days. You can choose to give to one, some, all or none of these. Here is the list.

All Saints, Ascension, Assumption, Christmas, Easter, Immaculate Conception, and Solemnity of Mary

I/We understand that authorized funds must be available in my/our specified account before ESSA Bank can withdraw funds according to your wishes.

I/We authorize ESSA Bank to deduct the above stated amounts at the frequency indicated above beginning on \_\_\_\_\_(date).

I/We understand that this service may be canceled or modified by notifying the Church office.

\_\_\_\_\_  
Signature Date Telephone Contact

\_\_\_\_\_  
Signature Date Telephone Contact