



OUR STORY OUR FUTURE

FREMANTLE / WELLARD

TWELVE MONTH FAITH PROMISE CARD

OUR STORY OUR FUTURE

C3 Church Fremantle/Wellard

NAME: _____
PHONE: _____
EMAIL: _____

HOW TO GIVE YOUR 12 MONTH FAITH PROMISES

please use your name & OSOF on the transaction reference

Weekly
Fortnightly
Monthly

- \$500
 \$200
 \$100
 \$50
 \$20
 Other _____

One Off _____

SET UP DIRECT DEBIT (*automatic withdrawal*)

Account Name _____

BSB No. _____

Account No. _____

Signature _____

CASH

DIRECT DEPOSIT

Name of Account:

Christian City Church

Fremantle

BSB No: 036 048

Account No: 423445

CREDIT CARD

Visa / Mastercard

Card Number _____

Name on Card _____

Expiry Date _____

Signature _____

Your faith promise should not replace your normal tithes, rather it is an over and above offering. All information on this card will be treated in the strictest confidence.