

## PAYMENT SLIP FOR DEBIT AND CREDIT CARDS

Please pay **BIRKDALE BAPTIST CHURCH** the sum of \$

**Frequency of Payment:**

Once Only  Weekly  Monthly  Quarterly  Yearly

**Payment Commencing Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ .

Charge my debit/credit Card

**DETAILS**

Type of Card      Visa       Mastercard       Bankcard       Other

Card No.                      \_\_\_\_\_

Name on Card                      \_\_\_\_\_

Expiry Date                      \_\_\_\_ / \_\_\_\_ .

Signature                      \_\_\_\_\_                      Date      \_\_\_\_ / \_\_\_\_ / \_\_\_\_ .