

For those who would rather print and send your information via mail, you are welcome to complete this form and send it to the address listed at the bottom.

CHARLOTTESVILLE, VA



Whether you'd like to give a single gift or schedule ongoing donations, you can do it all electronically. It's quick, easy, and secure! With our electronic giving option, you can give by using your checking account, debit or credit card, whichever is most convenient. This safe and flexible option is one of the easiest ways to give to Charlottesville Vineyard Church.

The community at Charlottesville Vineyard Church thanks you for supporting the work of being a vibrant, Jesus-centered presence in our city!

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

If you would like to receive updates from Vineyard Church through our weekly newsletter, please select the Opt-In checkbox.

\_\_\_ I would like to make a Recurring Gift as a:

\_\_\_ Weekly Gift - (processes every 7 days)

\_\_\_ Bi-Weekly Gift - (processes every 14 days)

\_\_\_ Monthly Gift

\_\_\_ Annual Gift

Process my gift on the: \_\_\_ 1<sup>st</sup> \_\_\_ 5<sup>th</sup> \_\_\_ 10<sup>th</sup> \_\_\_ 15<sup>th</sup> \_\_\_ 20<sup>th</sup> \_\_\_ 25<sup>th</sup> of the month

To start on: \_\_\_/\_\_\_/\_\_\_ (mm/dd/yyyy)

OR

\_\_\_ I would like to make a One-Time Gift.

Donation Amount \$ \_\_\_\_\_

Please apply my gift to: \_\_\_ General Fund \_\_\_ Community Life Pastor (Nathan) \_\_\_ Leap of Faith

\_\_\_ Flourish Retreat

Comments: \_\_\_\_\_

\_\_\_ Yes! I wish 100% of my donation amount to go to Vineyard Church. I would like to pay the processing fee associated with my donation. (Please enter amount below)

Please add \$ \_\_\_\_\_ (2.81% for all donations)

Total Donation Amount: \$ \_\_\_\_\_ (required)

\_\_\_ Enclosed is a voided check for my recurring donation. Please transfer my gift from my checking account.

**\*\*For One-Time Checking Account donations, please include a completed check with your donation**

OR

\_\_\_ My credit card information is listed below for my donation. Please transfer my gift from my credit card.

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_/\_\_\_



I understand my future donations will be transferred directly from my account as stipulated above. I understand that I may increase, decrease, or suspend my gift at any time through the online donation form at [www.cvillevineyard.org](http://www.cvillevineyard.org) or by contacting Vineyard Church by phone or mail. All donations provided to Vineyard Church comply with U.S. laws and regulations.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Required)

Please make a copy of this form for your records or you can request a copy from Vineyard Church

P.O. Box 681 • Keswick, VA 22947 • (434) 321-8463

[www.cvillevineyard.org](http://www.cvillevineyard.org) • [giving@cvillevineyard.org](mailto:giving@cvillevineyard.org)