



Name: _____

Street: _____

City, State, Zip: _____

Phone: _____ Email: _____

Signed: _____ Dated: _____

*In faith and prayer, as part of our commitment to Grace Church for 2019,
I/we intend to give \$_____ total for 2019.*

to be paid per Week Month Quarter Year

Gifts may be paid by cash, check or electronically with Bill-Pay or a credit or debit card through the Grace Church Website.

Please provide weekly offering envelopes.

Including Grace as a beneficiary of your estate creates a legacy that ensures the mission and ministry of Grace for future generations!

I/we would like information about planned giving/estate planning.

I/we have included or intend to include Grace in our Will.

***Please bring this card with you to the
Grace Church Ingathering,
Sunday, November 18th***

Note: This gift may be revised upon notice to the Parish Administrator.

(please see reverse)

PLEASE SHARE your time and talent through the ministries of Grace Church, by indicating your interests in the following ministries:

- | | |
|--|--|
| <input type="checkbox"/> Greet and Usher | <input type="checkbox"/> Gardening and Grounds |
| <input type="checkbox"/> Lay Reader or Chaliceist | <input type="checkbox"/> Cook for Salvation Army |
| <input type="checkbox"/> Sing in the Choir | <input type="checkbox"/> Help with Youth Activities |
| <input type="checkbox"/> Host Coffee Hour | <input type="checkbox"/> Fellowship Activities |
| <input type="checkbox"/> Foyer Groups | <input type="checkbox"/> Pack boxes and distribute food at Food Closet |
| <input type="checkbox"/> Visit Sick and Elderly | <input type="checkbox"/> Habitat for Humanity |
| <input type="checkbox"/> Write for Grace Quarterly | <input type="checkbox"/> Stewardship |
| <input type="checkbox"/> Teach Sunday School | <input type="checkbox"/> Outreach |
| <input type="checkbox"/> Adult Formation | <input type="checkbox"/> Grace Salon |
| <input type="checkbox"/> Women's Study Group | |
| <input type="checkbox"/> Farm Tour | |

