

## 2026 Pledge Commitment

*This information is confidential and only seen by Church Administrators.*

*The below pledge amount is valid from January to December of this year.*

Pledge	Weekly	Monthly	Quarterly	Annually
Amount *				
Frequency	X 52	X 12	X 4	X 1
Archdiocesan Assessment**				
Total				

\* Pledges Via Check: Please write "Pledge" in the memo to help us designate payment.

\*\*Suggested amounts for Archdiocese - \$100 individual; \$200 family

☐ Auto-Renew: Please keep my annual pledge amount as above and continue until I notify the Church Office otherwise.

☐ I will fulfill my pledge via PayPal (link on parish website homepage) or set up payment through my banking institution.

☐ I'm unable to offer financial support at this time, but wish to maintain an active St. George Membership.

Please return the form by January 31, 2026.

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

**For Church Office Use Only**

Envelope Number: \_\_\_\_\_

# Membership and Pledge Commitment Form - 2026

## St. George Orthodox Church – Terre Haute, IN

Preferred Household Mailing Name (i.e. "John and Jane Doe" or the "Doe Family")

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[ \_\_\_\_\_ ]  
City State Zip Home Phone Number

## Family Members

Head of Household (Single) (Married) (Divorced) (Widowed)

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Spouse

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

*Please list all dependent children (under 18) living in your household.*

*Any person (18 and older) should submit their own form.*

## Dependent Family Members

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

*Please use another sheet for additional dependent children (under 18).*