





# Payment Form

**Diocese of Ottawa, Eastern Canada  
& Upstate New York**  
**Parish Life Conference July 4-7, 2024**  
Hosted By: St. Nicholas Church (Montréal, QC)  
80 de Castelnau St. East, Montréal, QC H2R 1P2  
514-270-9788  
[ottawapl@antiochianevents.com](mailto:ottawapl@antiochianevents.com)  
[www.ottawapl.org](http://www.ottawapl.org)

Please complete the information and mail or e-mail completed form to the information above. To process all transactions, the billing address must match the credit/debit card or checking account statement. If the address is the same please check box under the appropriate section, if not provide billing address below.

**All forms must be completed and include full payment in order to be accepted and processed**

<p><b>Purchase Item (s)</b> <i>Check all item(s) that is for this payment:</i></p> <p><input type="checkbox"/> Event Registration   <input type="checkbox"/> Souvenir Journal   <input type="checkbox"/> Sponsorship/Donation   <input type="checkbox"/> Vendor</p>
<p><b>Payment Options (Check one):</b></p> <p><input type="radio"/> Credit/Debit Card   <input type="radio"/> Check   <input type="radio"/> Cash/Money Order</p>
<p><b>Credit/Debit Card Information</b> <i>to be completed for all Credit/Debit Card Payments</i></p> <p><input type="checkbox"/> Credit/Debit Card billing address is same as previous page, if different billing address, please include billing address below</p> <p>Credit/Debit Card No: _____</p> <p>CVV2: _____ Exp. Date: _____</p>

<p><b>Check Information</b> <i>to be completed for all Credit/Debit Card Payments</i></p> <p>Check No: _____</p>
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Please Include Credit/Debit Billing address if different than first page

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

Billing Address: \_\_\_\_\_

City & State/Province: \_\_\_\_\_

Zip Code/Postal Code: \_\_\_\_\_

I acknowledge and understand that all purchases and/or donations are **non-refundable** as set forth in the Privacy Statement at [www.antiochianevents.org/privacy/ottawa](http://www.antiochianevents.org/privacy/ottawa); and hereby authorize the Antiochian Archdiocese, Diocese of Ottawa Parish Life Conference, to charge the credit/debit card as set forth on this form for all purchases and/or donations. When paying by check, **only checks drawn from Canadian Bank** will be accepted (for all other payments, please use credit/debit card). Please do not mail a check with form. *All checks/credit card charges will appear on your statement as Antiochian Archdiocese.*

Amount: \$ \_\_\_\_\_ (CDN)      Date: \_\_\_\_\_

Signature \_\_\_\_\_

*Signature required for all forms; Unsigned forms will not be processed!*

## Sample Credit/Debit Card

