Sponsorship and Donation Order Form



Diocese of Worcester and New England Parish Life Conference June 21-23, 2024

Hosted By: St. Michael Church (Cotuit, MA) 62 Main Street, Cotuit, MA 02635 (508) 420-1113

> worcesterplc@antiochianevents.com www.worcesterplc.org

Following the tradition of the past Parish Life Conferences, we are soliciting Sponsorships/donations to underwrite the cost of events and fixed expenses, while providing a means to make this Parish Life Conference a success. All sponsors/donors will be recognized for their support throughout the Conference.

Deadline: May 31, 2024

All sponsors/donors will be recognized through-out the Conference with signage.

Select one of the following items you would like to sponsor

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Earmark	Targeted Amount (USD)
Sunset Cruise, Dinner and Dance on the Pilgrim Belle	\$5,000.00
Order of St. Ignatius & Mission Council Luncheon	\$3,000.00
Clergy/Wives Luncheon	\$1,500.00
Keynote Speaker	\$1,500.00
Social Reception & Dinner at the Reception	\$1,000.00
Men's Workshop	\$1,000.00
Sunday Farewell Coffee Hour	\$1,000.00
Teen Activities	\$1,000.00
Registration Welcome Bag	\$1,000.00
Antiochian Women's Meeting and Breakfast	\$1,000.00
Movie Night "Man of God"	\$500.00
Family Walking Tour of Plymouth and Mayflower II	\$500.00
General Donation	

Provide the exact text of your Sponsorship/Donation Message Include how you want your name(s) to read.				
Name:				
Total Amount: \$				
Company:				
Address:				
City & State/Province:				
Zip Code/Postal Code:Telephone:				
E-mail:				
Diocese:				
Parish Name:				

Parish City: _

Parish State/Province:

Payment Form



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Please complete the information and mail or e-mail completed form to the information

Purchase Item (s) Check all item(s) that is for this payment: ☐ Event Registration ☐ Souvenir Journal ☐ Sponsorship ☐ Donation						
Payment Options (Check one):						
○ Credit/Debit Card ○ Check (E-Check) ○ Cash/Money Order						
Credit/Debit Card Information to be completed for all Credit/Debit Card Payments Credit/Debit Card billing address is same as previous page, if different billing						
address, please include billing address below						
Credit/Debit Card No:						
CVV2: Exp. Date:						
Check (E-Check) Information to be completed for all Check Payments U. S. Accounts Only!						
□ Checking Account billing address is same as previous page, if different billing address please include billing address below						
Bank Account Type ○ Checking ○ Business Checking						
Name on Checking Account:						
As its appears on check						
Bank Routing (ABA) Number:						
9 Digit Bank Code (see Sample on right side)						
Bank Account Number: 6-15 degit account number (see sample in eight side)						

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

Please Include Credit/Debit or Checking Account Statement Billing address if

different than provided first page Name:_____ Billing Address: City, State, Zip Code: I acknowledge and understand that all purchases and/or donations are nonrefundable as set forth in the Privacy Statement at at http:// www.antiochianevents.org/worcester/terms-of-use; and hereby authorize the Antiochian Archdiocese, Diocese of Worcester and New England Parish Life Conference, to charge the credit/debit card or bank account as set forth on this form for all purchases and/or donations. When paying by check, only checks drawn from U. S. Banks will be accepted (for all other payments, please use credit/debit card). All checks will be processed electronically (via E-Check/ ACH). Please do not mail a check with form. All checks/credit card charges will appear on your statement as Antiochian Archdiocese. Amount: \$_____(USD) Signature

Sample Credit/Debit Card

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



Sample Check

	salari	2400
PAY TO THE ORDER OF		\$ DOLLARS
FOR	6724301068#	2400#
Routing Number	Account Number	Check Number