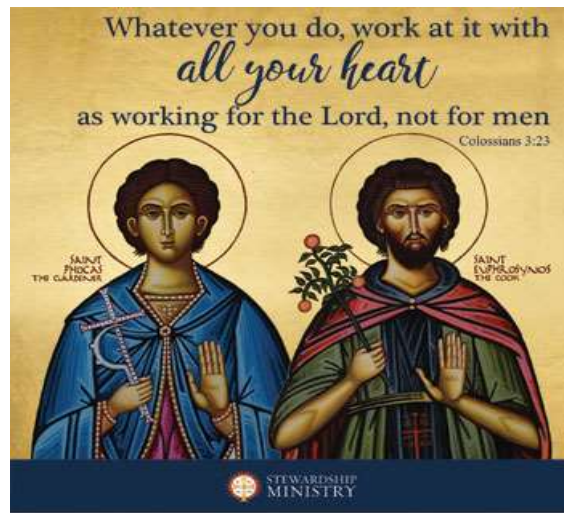


**ST. CHRISTOPHER
HELLENIC ORTHODOX
CHURCH**

**2018 MINISTRY &
PLEDGE FORM**



Family Name: _____

Address: _____

Phone Number: _____

Please check \checkmark those items in which you or a member of your family has some expertise or interest.
Place name or initials of the specific family member after each item checked.

- | | | |
|--|--|---|
| <input type="checkbox"/> Philoptochos | <input type="checkbox"/> Hellenic Language | <input type="checkbox"/> Prosphora/Kolyva/Artoklasia |
| <input type="checkbox"/> Religious Education | <input type="checkbox"/> Hellenic Dance | <input type="checkbox"/> Altar Boys/Myrrh Bearers |
| <input type="checkbox"/> Outreach Committee | <input type="checkbox"/> GOYA | <input type="checkbox"/> Education, Youth, Culture & Diakonia |
| <input type="checkbox"/> Choir | <input type="checkbox"/> HOPE/JOY | <input type="checkbox"/> Chantors |
| <input type="checkbox"/> Greeters/Closers | <input type="checkbox"/> Bookstore | <input type="checkbox"/> Reader (Epistle) |
| <input type="checkbox"/> GreekFest | | <input type="checkbox"/> Other _____ |

2018 Church Contributions:

Total Pledge: _____ In payments of: _____

To Be Paid: Weekly Monthly Annually

- Yes, I would like to use a Credit Card for my Financial Stewardship
 Credit Card Agreement attached

I will set up via Online Giving at stchristopherhoc.org

- Have you remembered St. Christopher's in your will or estate planning?
 Yes
 Please send me information

Signature(s) Date Preferred Email Address

(Please return to Julie Skouteris, Stewardship Chair)