

The St. Matthew Society Enrollment Form

To the greater glory of God and our Church, I/we have provided for a planned gift to my/our parish, _____, or to the _____ ministry of the Diocese of Bethlehem.

I/We have provided for this gift by: (optional)

- Will
- Trust
- Life Insurance
- Retirement or investment account
- Other
- I/We wish to make a gift and would like to be contacted

Name(s): _____

Parish: _____

Home Address: _____

Phone: _____ Email: _____

I give permission for my/our names to appear on the list of St. Matthew Society Members as: _____

I/We prefer that this gift remain anonymous

Please contact me/us to discuss details about making a planned gift

Signature: _____

Date: _____

Please return this enrollment form to:
The Diocese of Bethlehem,
333 Wyandotte Street, Bethlehem, PA 18015

Thank you for your gift and for
filling out this form.

