



St. Katherine
Greek Orthodox Church

3149 Glen Carlyn Road Falls Church, VA 22041
 Office (703) 671-1515 FAX (703) 671-1385



Stewardship Pledge

In faith, prayer and sacrifice, my family and I wish to share in the support and work of our Greek Orthodox Church of St. Katherine. Out of our love and gratitude to God for all His blessings, we would like to pledge ONE HOUR'S PAY PER WEEK, or the amount of \$_____ for the year 20__.

This amount will be paid as follows:

\$_____ annually (lump sum)	\$_____ monthly
\$_____ semi-annually (2 payments)	\$_____ weekly
\$_____ quarterly	

Name _____ *(additional family information requested below)*
 Address _____ Email: _____
 City, State, Zip _____ Phone: _____

Your pledge is **strictly confidential**. Should increased blessings or adverse circumstances affect the amount you give, please advise the priest in a written statement.

Signature *Date*



Family Information:

Also participating in this pledge are the following family members:

Spouse: _____	DOB: _____
Child: _____	DOB: _____
Child: _____	DOB: _____
Child: _____	DOB: _____
Child: _____	DOB: _____
Child: _____	DOB: _____
Child: _____	DOB: _____

Please check areas of expertise, interests, and hobbies of family members.

- Bible Study Youth Work Teaching Sunday School Greek School Choir Scouting
- Visiting Elderly/Sick Cooking Church Socials Finance/Accounting Parish Newsletter
- Construction Computers Gardening Mechanical Stewardship Office Work
- Web Site Set-Up/Management Other _____