

The purpose of this form is to provide the PGS with Parish bank information and Parish contact details to enable your Parish to participate in the Parish Giving Scheme.

# PARISH DETAILS

|  |  |
| --- | --- |
| Church Name: |  |
| City/Town/Village: |  |
| Church code: | (to be completed by the diocese) |
| Diocese: |  |

**CONTACT DETAILS**

|  |  |
| --- | --- |
| **Overall project leader** in your Parish.  Title/Name: Address: | |
| Contact number: | Email address: |
| **Treasurer.**  Title/Name: | |
| Contact number: | Email address: |
| **PGS Statement Receiver.**  Title/name: Address: | |
| Contact number: | Email address: |

**BANK DETAILS**

|  |  |
| --- | --- |
| **Parish or Church bank details.**  Name of Account: Bank name & Address: | |
| Sort code: / /  | Account number:  |

Signed & verified

Treasurer (sign) ……………….………… print name: …………………… date: ……..… Incumbent (sign) ……………………...… print name: ………………….… date:…………

Church Warden (sign)………………..…. print name:………………......,.. date:…………

*If the Parish is in vacancy, a second church warden may sign in place of the incumbent*

# Stewardship & Regular Giving Details

**These details will help us support you in your PGS journey and monitor the success of PGS in our Diocese so please do complete the requested details.**

|  |
| --- |
| **Date of PCC Resolution to Join PGS:** |
| **Does your Parish Intend to Use the Tokens: Yes/No** |
| **Copy Paying in Slip (for bank account referred to overleaf) attached: Yes/No** |

**THE GIVING PROGRAMME**

Please tick the programme you are intending to use alongside the implementation of the PGS

Giving in Grace Rural Giving Programme Giving for Life – Continuing the Journey

Give 10 Giving is God’s Way Parish Funding Programme

Other (please name the programme) ………………………………………………………………

We have run a giving or stewardship programme in the last 2 years

**When in the year do you hope to run your stewardship programme and/or begin using the PGS as a method of giving?**

**Month……………. Year………………**

**DONOR INFORMATION**

Please provide details about the existing regular giving in your parish based on the situation prior to the launch of PGS.

**How Many Regular Donors Does Your Parish Have** (i.e. weekly envelope or standing order, whether eligible for gift aid or not)

**(**Please write the **total number of donors** in the relevant box)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Method of giving** | **Weekly** | **Monthly** | **Quarterly** | **Annually** | **Total** |
| **Standing Order** |  |  |  |  |  |
| **Envelope** |  |  |  |  |  |
| **Total** |  |  |  |  |  |

**Data Protection Notice**

**Please note that by taking a PGS role in parish as either statement receiver or project leader, you will be sent a Diocesan Data Consent form so that you can be entered onto the database if you are willing (and not already on it due to another office you hold). This is so you can be informed of any important changes and information.**

**THANK YOU VERY MUCH FOR TAKING THE TIME TO COMPLETE THIS INFORMATION!**