

Archdiocesan Cathedral of the Holy Trinity 2019 Stewardship Commitment

*"So that you may lead lives worthy of the Lord, fully pleasing to Him,
as you bear fruit in every good work and as you grow in the knowledge of God" (Colossians 1:10).*

BAPTIZED OR CHRISMATED
ORTHODOX CHRISTIAN?

NAME (First/Last) _____

YES _____ NO _____

SPOUSE (First/Last) _____

YES _____ NO _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE NUMBER: (_____) _____

	Self	Spouse
Cell Phone		
Occupation		
Email		

Names of Dependent Children	Birth Date	Baptized Orthodox Christian?	Email (if applicable)

Check all that apply:

_____ I would like Fr. John to contact me
to schedule a house blessing for
the New Year.

_____ I would like the youth advisor to contact
me about enrolling my children in
Cathedral youth ministries.

Best time to call: _____

FOR OFFICE USE ONLY

Family Envelope # _____

Date to PDS _____ **by** _____

Date to CC _____ **by** _____

CC Amt _____ **starting** _____

Archdiocesan Cathedral of the Holy Trinity

337 East 74th Street, New York, NY 10021 Phone: 212-288-3215 Fax: 212-288-5876 www.thecathedralnyc.org

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COMMITMENT OF TREASURE (Personal and Confidential)

As an expression of my commitment to the ministry of Christ's Church,
I pledge as my total 2019 financial commitment to the Cathedral to:

- | | | |
|---|---|---|
| <input type="checkbox"/> Sponsor a Day (\$2,000) | <input type="checkbox"/> Sponsor Two Days (\$4,000) | <input type="checkbox"/> Sponsor Three Days (\$6,000) |
| <input type="checkbox"/> Pledge of \$1000 | <input type="checkbox"/> Pledge of \$500 | <input type="checkbox"/> Pledge of \$250 |
| <input type="checkbox"/> Young Adult Pledge (Ages 25 & Under) \$200 | <input type="checkbox"/> Other Amount: _____ | |

Please Be Sure to Select a Payment Frequency:

Above total to be divided and paid: One Time Quarterly Monthly

Please indicate the method(s) you will use for payment: Check Credit Card Website: thecathedralnyc.org

For Credit Card Orders:

Name on Card: _____

Credit Card Number: _____ Expiration Date: _____

Signature Authorization _____ Date _____

(Please complete and return entire form)

COMMITMENT OF TIME AND TALENT

Please select the activities that interest each of you.

NAME (Self) _____ NAME (Spouse) _____

Ministry	Self	Spouse	Ministry	Self	Spouse
Events			Social Clubs		
Bake or Cook for Event(s)			Primetimers Club (Senior Adults 65+)		
Set Up & Decorate for Event(s)			Parea Club (Married Adults 35+)		
Facilities & Maintenance			Cathedral Connect (Young Professionals)		
Education			Youth Ministries		
Adult Continuous Education			GOYA (Ages 12-17)		
Greek Dance Teacher or Assistant			JOY (Ages 7-12)		
Greek School Teacher or Assistant			HOPE (Ages 4-6)		
Sunday School Teacher or Assistant			Little Angels (Ages 3 and under)		
Liturgical			Office & Administration		
Sing in the Choir			Bookstore		
Assist in the Narthex			Library		
Assist in the Sanctuary			Office Assistant		
			Newsletter Support – CathedraLife		
Fundraising			Website / Technology Support		
Journal					
Raffle			Philoptochos		
Elder/Sick Care			Stewardship		