



2026 COMMITMENT APPEAL PLEDGE FORM

Your generosity makes a difference. At Bethlehem, we believe God is calling us into a future that is Alive Together—A New Creation in Christ.

This year's annual appeal, RENEW & RESTORE, invites us to join in God's ongoing work of renewal—breathing new life into us and restoring us for the journey ahead. Your pledge supports Bethlehem's day-to-day ministry, helping our community live out this hope together. **Bethlehem's 2025–2026 operating budget calls for a \$250,000 increase in generosity, which is an additional \$5,000 in giving per week.**

By completing this pledge form, you're making a faithful commitment to be part of what God is doing through Bethlehem in the coming year. Thank you for your generosity and partnership in ministry.

Name(s): _____

FOR 2026, I/WE WILL CONTRIBUTE A TOTAL OF \$ _____

This is an increase of \$ _____ per week/month/year (*circle one*).

I/WE WILL MAKE OUR CONTRIBUTION ON THE FOLLOWING SCHEDULE:

Please indicate how you will make your gift: *Check all that apply.*

☐ Weekly ☐ Monthly ☐ Annually ☐ Other (please explain) _____

Weekly/Monthly Amount (if applicable): \$ _____

RECURRING AUTOMATED

☐ I will set up automatic giving on REALM.

To set up automated giving use the authorization form on back or visit bltcmn.co/give to sign directly into REALM.

☐ I would like assistance setting up/changing my giving in REALM.

Please contact Sara Kleckner, Finance and Life Events Coordinator, skleckner@bethlehem-church.org, 612-312-3402.

☐ I authorize Bethlehem financial staff to adjust my REALM automated giving schedule to match my new pledge noted above.

To authorize changes to your automated giving, please complete the authorization form on back.

CASH OR CHECK

☐ I will give by writing a check and dropping it in the offering plate or mailing it to the church.

☐ I would like to receive printed envelopes. ☐ I would like to discontinue receiving printed envelopes.

ASSETS

☐ I will use my IRA to make part or all of my 2026 gift.

☐ I will use Stock to make part or all of my 2026 gift.

☐ I will use my Donor Advised Fund to make part or all of my 2026 gift.

Signature(s): _____ Date: _____



IF YOU HAVE ANY QUESTIONS REGARDING YOUR GIVING, PLEASE CONTACT WHITNEY STOFFLET,
DIRECTOR OF STEWARDSHIP & CREATIVE, AT WSTOFFLET@BETHLEHEM-CHURCH.ORG OR 612-312-3370.

AUTOMATED GIVING AUTHORIZATION FORM

Please complete this form to authorize regularly scheduled debits to your credit card or bank account. You will be charged the amount indicated below on your indicated giving schedule.



Bethlehem

Full Name:		
Address:		
City:	State:	ZIP:
Email:		
Preferred Phone Number:		Check one: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell

GIVING SCHEDULE: Choose fund(s) and frequency of giving

FUNDS (check all that apply):	Giving Frequency (check one):
<input type="checkbox"/> BLCTC Annual Operating \$ _____	<input type="checkbox"/> Weekly
<input type="checkbox"/> Spirit Garage Sunday Offering \$ _____	<input type="checkbox"/> Every Two Weeks
<input type="checkbox"/> Other \$ _____	on _____ (day of week)
<input type="checkbox"/> Other \$ _____	<input type="checkbox"/> Monthly
	<input type="checkbox"/> Twice a Month
	<input type="checkbox"/> Every Three Months
	on the _____ (date, i.e. "15th")
Initial here: _____ to cover processing fees for your gift (1% for checking account, 3% for credit cards)	

PAYMENT TYPE

Check one: <input type="checkbox"/> Checking Account (staple voided check below) <input type="checkbox"/> Credit Card (complete information below)	
Card #:	Expiration Date:
Name on Card:	CVV:
Billing Address (if different from above):	
<i>I authorize Bethlehem Lutheran Church Twin Cities to debit my checking or charge my credit card account in accordance with the information above. I understand this authority will remain in effect until I provide reasonable notification to terminate such authorization.</i>	
Signature: _____ Date: _____	