

EVERY ORPHAN'S HOPE



MAKE A DONATION TO EVERY ORPHAN'S HOPE

Please print this form, complete it and mail it, along with your donation, to:

Every Orphan's Hope
3245 W. Main St. Ste. 235 / 332
Frisco, TX 75034

Contact Information:

Prefix: _____ First Name _____ Middle Int. _____ Last Name _____

Address _____

City _____ State/Province _____ Zip Code / Postal Code _____ Country _____

Phone(s) _____ Email Address _____

Your contributions to Every Orphan's Hope are tax deductible. Thank you for your generous support!

I desire to partner with Every Orphan's Hope and share the love of Jesus Christ with orphans in the following ways:

Sending orphans to Camp Hope Bible Camp: \$30 sends one orphan.

I desire to send _____ Orphan(s) x \$30 = _____.

Sponsoring an orphan: \$43 per month sponsors one orphan.

I desire to sponsor _____ Orphan(s) x \$43 = _____/month.

Sponsoring or Purchasing a My Father's House Orphan Home.

\$500 per month sponsors a house of eight orphans and a caretaker.

\$30,000 purchases a My Father's House Orphan Home, I've enclosed \$_____ toward the purchase of a home.

Supporting the monthly needs of the Schneider family and/or the Sendgikoski family, Career Missionaries to Zambia.

I desire to sponsor the Schneider family with a monthly pledge of \$_____/month (OR) a one time gift of \$_____.

I desire to sponsor the Sendgikoski family with a monthly pledge of \$_____/month (OR) a one time gift of \$_____.

Supporting the Camp Hope project

I desire to contribute towards the Camp Hope facilities development with a gift of \$_____.

Engaging the Church in Orphan Sunday!

I desire to fulfill the mission of Orphan Sunday which engages the Christian church in the call to "look after" orphans with one voice for one purpose — to Love, Protect, Pray and Provide for the orphans in their communities with a gift of \$_____.

I desire to give a one time gift of \$_____ for ongoing strategic needs of the ministry.

I commit to pray faithfully for the ongoing ministries of Every Orphan's Hope.

Amount of Total Donation: \$_____ Donation Method: _____ Credit Card _____ Check (made payable to Every Orphan's Hope)

Credit Card Type: _____ Visa _____ Mastercard _____ American Express _____ Discover

Credit Card #: _____ Exp. Date (month/year): _____/_____/_____ 3 or 4 digit CVV security code: _____

Name of Card Holder: _____ Signature of Card Holder: _____