

Sponsorship Form

Yes! I am interested in sponsoring a child in India for only \$40.00 a month.



Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Phone: _____
Email address is required to access your account on our website: _____
Child Preference: _____ Male _____ Female _____ No Preference Approximate Age: _____ (if desired)

Please check a payment plan:

Automatic Draft From Your Checking Account / Voided check enclosed.

I authorize Holiday Park Church of Christ-India Fund to draft my checking account on the 10th of the month in the amount of \$ _____ until further notice.

Authorized Signature: _____

Visa or Master Card

I authorize the Holiday Park Church of Christ-India Fund to charge my account \$ _____ on the 10th of the month until further notice.

Card: _____ Account Number: _____

Exp Date: _____ V Code, (3-digits on back of card): _____

Name as it appears on card: _____

Authorized Signature: _____

Personal Check (Enclosed) / Please check payment term:

Monthly \$40.00 Bi-Monthly \$80.00 Quarterly \$120.00

Semi-Annually \$240.00 Annually \$480.00

Due by the 10th of the month and made payable to:

Holiday Park Church of Christ-India Fund (HPCof C-India Fund), PO Box 751, Monroeville, PA 15146

For our records please complete:

Church affiliation: _____

How did you hear about James Connection? _____

Please mail this completed form to **HPCofC-India Fund, PO Box 751, Monroeville, PA 15146**. For more information or questions please contact Beth Weber at (412) 419-4614 or sponsor@jamesconnection.org.

Thank you for changing the life of a child!