

CALVARY MISSIONS SUPPORTER RESPONSE

Date _____

Name _____

Address _____

City _____ St _____ Zip _____

Phone (____) _____

Email _____

CREDIT CARD INFORMATION

MASTERCARD VISA

AMEX DISCOVER

CREDIT CARD NUMBER

____/____/____ \$

EXP. DATE CVC CODE AMOUNT

SIGNATURE _____

THIS GIFT SHOULD BE IN ADDITION TO YOUR CHURCH TITHES. YOUR GIFTS ARE INCOME TAX DEDUCTIBLE.

MISSIONARIES

	I will pray for:	I will financially support:
David Carter: Release the Kingdom Ministries	<input type="radio"/>	<input type="radio"/>
Daniel DeJesus: Prison Ministry	<input type="radio"/>	<input type="radio"/>
Eric & Wendy Eldridge: Beyond / Eden Womens Ministries	<input type="radio"/>	<input type="radio"/>
Ana: Refugee Ministry in Europe	<input type="radio"/>	<input type="radio"/>
Gene & Rene Haub: FamilyLife Ministries	<input type="radio"/>	<input type="radio"/>
Joseph Jordana: YWAM, England	<input type="radio"/>	<input type="radio"/>
Chase & Megan: Restricted Nation	<input type="radio"/>	<input type="radio"/>
Angela Petry: International House of Prayer	<input type="radio"/>	<input type="radio"/>
Michael Newman: Christian Coalition for Reconciliation	<input type="radio"/>	<input type="radio"/>
Myanmar Evangelists & Church Planters	<input type="radio"/>	<input type="radio"/>

OTHER

My commitment for monthly financial support is \$ _____ to _____.

I would like to give a one-time Love Gift to: _____ Amount: \$ _____.

PLEASE MAKE CHECKS PAYABLE TO: CALVARY MISSIONS
Calvary Missions 7550 Cherry Park Drive Houston, TX 77095
281.550.4323 calvaryhouston.com