

CABINS *for* CAMPERS

Name(s) _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

I/We intend to contribute the following to the CABINS for CAMPERS campaign:

\$ _____ Total Gift

\$ _____ Amount Enclosed

\$ _____ Remaining Faith Promise

I/We will fulfill this Faith Promise over: ☐ One Year ☐ Two Years

I/We will make payments: ☐ Monthly ☐ Quarterly ☐ Annually ☐ Other _____

Please apply my/our gift to the project as follows:

☐ Kish Transformation _____ ☐ Endowment _____

Continue on the reverse side

GIVING OPTIONS:

- **Give online:** covenantharbor.org/give
- **Give by check:** Payable to Covenant Harbor
- **Give by stock or through charitable IRA distribution**
- **Give by credit card:** ☐ Discover ☐ MasterCard ☐ Visa

Card Number _____ Expiration Date _____ CW _____

Name as it appears on card (please print) _____

In Covenant Harbor publication and recognition pieces, please list my/our name(s) without amount as follows: _____

☐ I/We wish to remain anonymous.

