



## PLEDGE CARD

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

I/We plan to give \$ \_\_\_\_\_ each  week  month  
for an annual total of \$ \_\_\_\_\_ towards our mission and ministry.

I/We understand that this pledge can be changed at any time.

Signature \_\_\_\_\_ Date \_\_\_\_\_