



CHILD SPONSORSHIP

faithhome.honduras@gmail.com

(573)785-7746

Faith Home children are fully funded by individuals - like you - who are willing to give financially so that the children can have a better life and grow up to do what God has called them to do...reach their country for Christ. When you commit to sponsor a child, you become a partner in our ministry. We will keep you updated about the child, so you can celebrate their life with us, knowing YOU are a vital part.

One sponsorship costs \$25 per month...(83 cents per day)

Currently it takes approximately 18 sponsorships per child

One hundred percent of a child sponsorship goes toward caring for the child.

(food, shelter, clothing, education, house parents, psychologist, social worker, medical, etc.)

SPONSORED CHILD'S NAME: _____

Amount per month: \$ _____

PAYMENT METHOD:

Charge my Debit / Credit Card

Name as appears on card: _____

Billing Address for card: _____

City, State Zip _____

Mastercard Visa Discover

Card Number _____

Expiration Date _____ CVV# _____

Amt to Charge _____

I will send a check

GBIM

100 Stinson Dr.

Poplar Bluff, MO 63901

(memo Faith Home & child's name)

Draft my checking account (form below)

AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWALS (ACH DEBITS)

I hereby authorize General Baptist Ministries to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error, to my account indicated below and further authorize the depository named below to debit and/or credit the same to such account.

I authorize General Baptist Ministries to debit my (_____checking account) (_____savings account) \$_____ on the first working day each month, beginning _____, to be designated for use in the following manner: _____.

****Please enclose a cancelled check from which General Baptist Ministries may obtain your account information*

This authority is to remain in full force and effect until General Baptist Ministries has received written notification from me of its termination in such time and in such manner as to afford General Baptist Ministries and the depository a reasonable opportunity to act on it. **REQUESTS MUST BE RECEIVED 5 WORKING DAYS BEFORE THE 1st WORKING DAY OF THE MONTH TO BE INCLUDED OR REMOVED FROM THE UPCOMING BATCH.**

MY CONTACT INFORMATION:

First Name: _____ Last Name: _____

Address: _____ State _____ Zip _____

City _____ Church: _____

Telephone _____ e-mail _____

Signature _____