

Ministry Partnership Card

Please fill out the following in detail and send back in the supplied envelope.

Your Name: _____
Ministry Leader's Name: _____

With prayer, I will commit to:

- Pray for the above ministry participant at least once a week.
- Support financially the Ministry Leader in their efforts to reach the lost for the sake of Christ. *(If enclosing a check, please remember to make the tax-deductible donation to _____ Ministry and on the memo line write _____ Ministry. Please do not write the participants' name anywhere on the check for tax purposes! If you want to donate online go to www._____, click on the _____ tab and you will be able to donate to the _____ Ministry.*

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