



# Child Sponsorship Form

All gifts are confidential. **Please print clearly.**

name \_\_\_\_\_

address \_\_\_\_\_

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

home phone \_\_\_\_\_

work phone \_\_\_\_\_

e-mail \_\_\_\_\_

Child sponsorships are ongoing. To conclude your sponsorship, please contact Lindy Thomas, 949.854.7030 x431.

rev. 7/2007



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## Sponsorship Info

country \_\_\_\_\_

orphanage \_\_\_\_\_

number of children sponsored \_\_\_\_\_ x \$35 = \_\_\_\_\_

- bank withdrawal:** \$ \_\_\_\_\_ [please enclose a voided check]
- beginning : \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
day month year
- credit card:** \$ \_\_\_\_\_  **visa**  **mastercard**
- beginning : \_\_\_\_\_ / \_\_\_\_\_  
month year

card number \_\_\_\_\_ exp. date \_\_\_\_\_

name on card \_\_\_\_\_

signature \_\_\_\_\_ date \_\_\_\_\_

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