

MAKE A DONATION



<p>Where Most Needed \$ _____</p> <p><input type="checkbox"/> \$25 <input type="checkbox"/> \$250 <input type="checkbox"/> \$50 <input type="checkbox"/> \$500 <input type="checkbox"/> \$100 <input type="checkbox"/> Other</p> <p><input type="checkbox"/> Make this a recurrent monthly donation</p>	<p>Water Wells \$ _____</p> <p><input type="checkbox"/> \$25 <input type="checkbox"/> \$250 <input type="checkbox"/> \$50 <input type="checkbox"/> \$500 <input type="checkbox"/> \$100 <input type="checkbox"/> Other</p> <p><input type="checkbox"/> Make this a recurrent monthly donation</p>
<p>One-Day Church \$ _____</p> <p><input type="checkbox"/> \$25 <input type="checkbox"/> \$250 <input type="checkbox"/> \$50 <input type="checkbox"/> \$1,500 to sponsor a One-Day Church <input type="checkbox"/> \$100 <input type="checkbox"/> Other</p> <p><input type="checkbox"/> Make this a recurrent monthly donation</p>	<p>Ultimate Workout Alumni \$ _____</p> <p><input type="checkbox"/> \$25 <input type="checkbox"/> \$250 <input type="checkbox"/> \$50 <input type="checkbox"/> \$500 <input type="checkbox"/> \$100 <input type="checkbox"/> Other</p> <p><input type="checkbox"/> Make this a recurrent monthly donation</p>
<p>One-Day School \$ _____</p> <p><input type="checkbox"/> \$25 <input type="checkbox"/> \$250 <input type="checkbox"/> \$50 <input type="checkbox"/> \$5,000 Share of a One-Day School <input type="checkbox"/> \$100 <input type="checkbox"/> Other</p> <p><input type="checkbox"/> Make this a recurrent monthly donation</p>	<p>Maranatha Mission Stories \$ _____</p> <p><input type="checkbox"/> \$25 <input type="checkbox"/> \$250 <input type="checkbox"/> \$50 <input type="checkbox"/> \$500 <input type="checkbox"/> \$100 <input type="checkbox"/> Other</p> <p><input type="checkbox"/> Make this a recurrent monthly donation</p>
<p>The \$10 Church Program \$ _____</p> <p><input type="checkbox"/> \$10 <input type="checkbox"/> Other <input type="checkbox"/> \$120</p> <p><input type="checkbox"/> Make this a recurrent monthly donation</p>	<p>Other \$ _____</p> <p>_____</p> <p>_____</p> <p>_____</p>

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Credit card donations are processed in US dollars. Your credit card statement will reflect the prevailing currency conversion rates and/or fee for non-US transactions. To receive a Canadian tax deductible receipt please mail check and this form to Canadian address below.

I WOULD LIKE TO DONATE BY CREDIT CARD: Visa MasterCard American Express

Credit Card Number _____ Amount \$ (US Funds) _____

Expiration Date _____ Signature _____

I WOULD LIKE TO DONATE BY CHECK: Amount \$ _____ *Make check payable to Maranatha Volunteers International*

Please mail to (In United States):
 Maranatha Volunteers International
 990 Reserve Drive
 Suite 100
 Roseville, CA 95678

Please mail to (In Canada):
 Maranatha Volunteers International Association
 c/o V06494C
 PO Box 6494, Station Terminal
 Vancouver, BC V6B 6R3
 CANADA