



❖ CHILD SPONSORSHIP FORM

Thank you for responding to the call of Christ to love an orphaned child. By contributing on a monthly basis you will truly change a child's life. Please fill out this form completely. Once we receive your Child Sponsorship form, you will be sent a Child Sponsor Packet. It will include information about your child, a photo of him/her and other program details that will bless you and your sponsored child.

CHOOSE TO SPONSOR A BOY OR GIRL

- Boy or Girl most in need of Sponsoring
- Boy ages 4-11
- Boy ages 12-18
- Girl ages 4-11
- Girl ages 12-18

MONTHLY COMMITMENT

My monthly commitment will be:

- \$25
- \$50
- \$100
- \$150
- \$250
- Other _____

PAYMENT

_____ Initial, one time gift
 _____ First monthly payment
 _____ **TOTAL** I wish to pay now

PAYMENT DETAILS

Please select your method of payment

- Credit Card
 - Card Type
 - VISA
 - Master Card
 - AmEx
 - Discover
 - Card Number _____
 - Name on Card _____
 - Expiration Date: _____
 - Signature: _____
- Check

Child Hope International is a 501(c)3 organization. Your contributions are tax deductible. You will receive an annual statement of contributions for your records.

PERSONAL INFORMATION

- This is my first involvement with Child Hope.
- I have sponsored or donated to Child Hope before.
- This is a group project. I represent a _____

My First Name _____

My Last Name _____

- Under 18

Mailing Address _____

City _____

State _____

Zip/Postal Code _____

Country _____

Home Phone _____ Preferred

Business Phone _____

Cell Phone _____

Email _____

MESSAGE (optional)

MAIL

Please mail this completed form with your payment to:

Child Hope International
PO Box 3677
Redondo Beach, CA 90277