



Pledge Form

To assist in the development of Christian leaders in the armed forces of the world and in the establishment and growth of military Christian fellowships.

Donor Information (please print or type)

| | |
|----------------------|--|
| Name | |
| Billing address | |
| City | |
| State | |
| ZIP Code | |
| Telephone (home) | |
| Telephone (business) | |
| Fax | |
| E-Mail | |

Pledge Information

I (we) pledge a total of \$_____ to be paid:
___ now ___ monthly ___ quarterly ___ yearly.

I (we) plan to make this contribution in the form of:
___ cash ___ check ___ credit card ___ other.

| | |
|----------------------|--|
| Credit card type | |
| Credit card number | |
| Expiration date | |
| Authorized signature | |

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

| |
|--|
| |
|--|

___ I (we) wish to have our gift remain anonymous.

| |
|--------------|
| Signature(s) |
| Date |

Please make checks to:

ACCTS
PO BOX 27239
Denver, CO 80227