

# I WOULD LIKE TO GIVE A GIFT OF HOPE AND HEALING!



Name \_\_\_\_\_  I wish to remain anonymous

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Enclosed is check for \$ \_\_\_\_\_ (Payable to *The Refuge Center for Counseling*)

One-time gift    A monthly gift of \$ \_\_\_\_\_  FaithBuilder  DreamBuilder

Please charge my credit card \$ \_\_\_\_\_

Card Number \_\_\_\_\_

Card Type \_\_\_\_\_ CVC \_\_\_\_\_ Exp. Date \_\_\_\_\_

Contact me about stock options, endowments, etc

*NOTE: Unless designated, donated funds may be used to pay for general operating expenses, capital campaign projects and/or related expenses, etc.*



Give Online