gospelink

DONATION FOR:	*Sponsorship for:*	NAME	ID #

To mail check donations, please **print this form**, make checks **payable to Gospelink**, and return to the **address below.**

NAME: _____

DONOR ID #: _____

PAYMENT DETAILS

☐ **SPONSORSHIP AMOUNT** | ☐ **ADDITIONAL GIFT FOR:** | ☐ **ADDITIONAL GENERAL OPERATIONS GIFT**

☐ I have enclosed a **CHECK** made payable to **GOSPELINK**

☐ I would like to place this gift on the following **CREDIT/DEBIT CARD**

CREDIT CARD INFORMATION:

NAME ON CARD _____

CARD NUMBER _____

EXP. DATE _____ **CVV NUMBER** _____ **SIGNATURE** _____

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