



Yes, I would like to support the ministry of
Camp Homewood
Missionary Staff & Projects



I would like to contribute \$ _____ (Amount): Monthly (Circle: the 1st or 15th)

Please debit my bank account (include a void cheque) or Visa / MasterCard:

Card No. _____ Exp. ____/____

NAME: _____ PHONE: _____

ADDRESS: _____

CITY/PROVINCE: _____ P.C.: _____

- Bailey** (General Director)
- Best** (Barn Manager)
- Chmelyk** (Intern Leader / Sailing)
- Contenti** (Site & Facilities Assistant)
- Hayes** (Food Services Manager)
- Loeve** (Site & Facilities Manager)
- Covid19 Survival Fund**
- General Operating Fund**
- Camper Sponsorship**
- Projects** _____

For monthly donations out of your bank account please attach a 'Direct Withdrawal Form' from your financial institution or a VOID cheque to this document and mail it to:

Box 40, Heriot Bay, BC, V0P 1H0

Jane Doe	790
123 Main St	Date _____
Anywhere US 10111	1-678/1239
PAY TO THE ORDER OF _____	\$ <input style="width: 50px;" type="text"/>
VOID	DOLLARS
Your Bank 456 Main St Anywhere US 10111	
MEMO _____	
⑆ 1 2 3 4 5 6 7 8 9 ⑆ 100 100 1 2 3 9 ⑆ 0 7 9 0	

Designated Giving Policy

Spending of funds is confined to Board approved programs and projects. Each restricted contribution designated toward an approved program or project will be used as designated with the understanding that when the need for such a program or project has been met, or cannot be completed for any reason as determined by the Board, the remaining restricted contributions designated for such program or project will be used where needed most.



