



CHRISTIAN **CAMP & CONFERENCE** ASSOCIATION

\$15/month = \$180/year
\$25/month = \$300/year
\$50/month = \$600/year
\$75/month = \$900/year
\$100/month = \$1,200/year
\$150/month = \$1,800/year

For Office Use Only

Check # _____

Amount \$ _____

Cash \$ _____

Here's my **PERSONAL** gift/pledge to CCA's ministry!

GIFT

My personal gift is: \$ _____ (enclosed)

Cash Check Credit Card *(Will be charged within 5-10 days)*

PLEDGE

My personal pledge is:

\$ _____ x 12 (monthly) = \$ _____ year

\$ _____ x 4 (quarterly) = \$ _____ year

Please bill my personal credit card for this pledge beginning on the first day of next month.

Please send me automatic withdrawal information.

Please print information below so a receipt can be mailed. Thank you for your gift!

Name(s) _____

Personal Credit Card Billing Address _____

City/State/Zip _____

Camp/Conference/Business with whom you are affiliated _____

My personal credit card information:

Visa MasterCard Discover/Novus AMEX

Personal Credit card # _____ | Exp. date _____

Cardholder's name _____ | V Code _____

Cardholder's signature _____ | Date _____

Gift/Pledge Designation

Special designation if other than specified project(s): _____



Enhancing Trust

Home Phone _____

Office Phone _____

Fax _____

E-mail _____

(Over)