

## TeachBeyond Support Pledge Form

With God's help, I wish to share in the support of \_\_\_\_\_ in the amount of

\$50/month  \$100/month  \$200/month  \$\_\_\_\_\_ /month, starting \_\_\_\_\_ (month/year)

Special gift of \$\_\_\_\_\_  I wish to receive a Newsletter  I will pray for your ministry.

Name: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov.: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Church name: \_\_\_\_\_

Make check/cheque payable to **TeachBeyond** and mail it with this form to the appropriate address below:

**U.S.:** TeachBeyond, PO Box 6248, Bloomingdale, IL, 60108-6248

**Canada:** TeachBeyond, 2121 Henderson Hwy., Winnipeg, MB, R2G 1P8

Tel. U.S.: 630 324 8177 or 800 381 0076 / Canada: 888 334 0055

*All donations will be receipted for income tax purposes.*

## Authorization for Automatic Withdrawal Donations

*Please fill in the address information above.*

I hereby authorize **TeachBeyond** to withdraw from my bank account my monthly pledge for the support of:

\_\_\_\_\_ (missionary's name).

Monthly support amount: \$ \_\_\_\_\_ to be drawn from the

account on the  **1st** or  **15th (Canada)**

or on the  **5th** or  **20th (United States)**

of each month beginning \_\_\_\_\_ (month/year).

### Office Use

Received: \_\_\_\_\_

Bank form: \_\_\_\_\_

Checked: \_\_\_\_\_

Ref. # \_\_\_\_\_

Deleted: \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Signature (please sign in ink)

\_\_\_\_\_  
Date

### Please Attach a Voided Check/Cheque

*In order to stop withdrawals, please notify TeachBeyond in writing (by post or email) two (2) weeks before the final withdrawal date.*