

# Donation Form

(Please print, complete, and mail this form to Grace Church, 43 Elizabeth St, Pemberton, NJ 08068)



## Grace Church

Our mission is to preach the gospel, and we seek to utilize the total resources of the congregation to further God's work

### Donor Information (please print or type)

Name \_\_\_\_\_

Billing address \_\_\_\_\_

City, St, Zip Code \_\_\_\_\_

Phone 1 | Phone 2 \_\_\_\_\_

Email \_\_\_\_\_

### Donation/Pledge Information

I (we) are donating in memory of (if any): \_\_\_\_\_

I (we) are donating to a specific ministry or project (food pantry, organ restoration, etc.). Enter here:

\_\_\_\_\_

I (we) pledge a total of \$\_\_\_\_\_ to be paid: ☐ now ☐ monthly ☐ quarterly ☐ yearly.

I (we) plan to make this contribution in the form of: ☐ cash ☐ check ☐ credit card ☐ other.

Credit card type | Exp. date \_\_\_\_\_

Credit card number \_\_\_\_\_

Authorized signature \_\_\_\_\_

### Acknowledgement Information

Please use the following name(s) in all acknowledgements: \_\_\_\_\_

\_\_\_\_\_

☐ I (we) wish to have our gift remain anonymous.

Signature(s)

Date

Please make checks, corporate matches,  
or other gifts payable to:

Grace Church  
43 Elizabeth St.  
Pemberton, NJ 08068