



I'd like to support The Ark Christian Youth Centre!

Please start a monthly donation on the _____ day of the month:

- \$1000/month \$500/month \$200/month \$100/month
 \$75/month \$50/month \$25/month \$_____/month

Please increase my current monthly donation to \$ _____/month

One-time Gift of: \$ _____ (Credit Card or Cheque)

(Please make cheques payable to The Ark Christian Youth Centre)

I am donating as an: Individual Business

Name: _____

Address: _____

Phone: _____

Email: _____

I authorize The Ark Christian Youth Centre to charge my credit card

- MasterCard Visa American Express

Name on Card: _____

Credit Card #: _____

Expiry Date: _____

I authorize The Ark Christian Youth Centre to debit my Canadian bank account (attach VOID cheque)

Signature

Date

Thank You For Your Support!