



# SUPPORT PLEDGE FORM

With the Lord's help, I/we wish to share in the ministry of \_\_\_\_\_.

**Missionary Name**

\_\_\_\_\_ \$50/month \_\_\_\_\_ \$75/month \_\_\_\_\_ \$100/month \$\_\_\_\_\_ month - Starting \_\_\_/\_\_\_ **MO/YR**

\_\_\_ I/We cannot support you on a monthly basis at this time.

We can support you with a special gift of \$\_\_\_\_\_.

\_\_\_ I/We will pray regularly.

\_\_\_ Please send prayer letter.

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

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

City: \_\_\_\_\_ Prov/State: \_\_\_\_\_

Postal/Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please make your check payable to Teach Beyond and mail it with this form to the address below:

**TeachBeyond, Box 6248, Bloomingdale IL 60108-6248**

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## PRE-AUTHORIZATION FOR AUTOMATIC WITHDRAWAL DONATIONS

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

\_\_\_\_\_

Amount: \_\_\_\_\_/month

To be drawn from the account on the \_\_\_ 1<sup>st</sup> or \_\_\_ 15<sup>th</sup> of each month starting \_\_\_/\_\_\_ **MO/YR**

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**DATE**                      **Signature (ink only please)**

**Name:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **Prov/State:** \_\_\_\_\_

**Postal/Zip Code:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

<b>Office Use Only</b>
Received: _____
Bank Form: _____
Checked: _____
Ref. # _____
Deleted: _____

**PLEASE ATTACH A VOIDED CHECK**