



One-time gift of: \$100 \$50 \$25 \$_____ (Other, specify amount)

Monthly commitment of \$_____ each month

Payment Options: Check enclosed Visa MasterCard

Credit Card # _____ Expiration Date: _____

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

A receipt for your **tax-deductible** contribution will be sent at the end of the calendar year.

You can also give online at www.healingwatersintl.org

You may be able to double your giving through a corporate matching gift. Ask your employer.
Healing Waters International is a registered 501(c)(3) tax-exempt non-profit organization.



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