Yes, I would like to support the Building on Our Blessings Campaign!

First Name(s):	Last Name(s):		
Address:		Prov:	PC:
Phone #:	Email:		
Church:	Signature(s):		
☐ I (we) wish to have our gift remain anonymous.			
l (we) pledge a total gift of \$			
☐ \$ annually for 3	years, paid during the mo	nth of	
☐ \$ monthly for 36	6 months, paid on the	day of the mon	th.
□ \$ as a one-time	gift, paid on	, 20	
s as a one-time	gift (enclosed).		
Payment(s) to be made as follows:			
☐ Cash delivered in a sealed envelope to Cr earmarked for the Building on Our Blessi	•	ol .	
☐ Cheque(s) made out to Credo Christian earmarked for the Building on Our Blessi			ALCOHOL:
☐ E-Transfer(s) submitted to donations@b	uildingonourblessings.cor	n	
☐ Credit card payment(s) made at building	gonourblessings.com		
Please return this pleage card & payr Building on Our Blessings	ment to:		
c/o Credo Christian High School Foundation 21846 52 Avenue, Langley, BC V2Y 2M7			
info@buildingonourblessings.com buildingonourblessings.com			
Charitable Registration Number: 85895 0074 RR0001			