

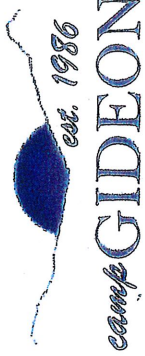
Camp Gideon 2016

Pledged Support Form

Our mission is to partner with the local church to make and mature passionate followers of Christ

Donor information

Name _____
Billing address _____
City, State, Zip _____
Phone _____
Email _____



Pledge Information

I (we) pledge a total of \$ _____ to be paid: once weekly monthly (May/June/July)

I (we) plan to make this contribution in the form of: cash check

Please send to: **Camp Gideon Attn: Staff Support 5350 Broadinour Cir: NW Canton, OH 44709**