



Yes! I would like to support New Hope Christian School by providing:

Prayer support

A one time gift (enclosed) \$1000 \$750 \$500 \$250 \$100 Other \$ _____

A gift to be given Monthly Quarterly Annually

Please contact me about:

Donating stocks to NHCS

Listing NHCS as a beneficiary

Endowment Fund

Volunteer Opportunities

Scheduling re-occurring payment by
"automatic withdrawal" from my bank account.

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

**Mail to: 5961 New Hope Road ~ Grants Pass OR 97527
(541) 476-4588**