



Extending a helping hand to the orphan

YES! I want to sponsor a child.

Sponsor Information:

Mr. _____ Mrs. _____ Ms. _____

First Name _____

Last Name _____

Address _____

City / State / Zip _____

Country _____

Phone _____

Email _____

Please fill out this form and return it along with a check or money order made payable to:

Hand of Hope Ministries
Attn: Children's Program
P.O. Box 293341
Nashville, TN 37229

For more information please email
handofhopeministries@yahoo.com

An annual gift of **\$300** will support **1** child through the Hand of Hope Children's Program. I commit to support _____ child(ren) for a period of _____ year(s). This can be renewed annually. Gifts should be made payable to Hand of Hope Ministries.

Sponsor Signature (required)

Dated

* * * * *

If you wish to sponsor the above child(ren) in honor of or memory of someone, please fill out the following.

_____ This sponsorship is in memory of : _____

_____ This sponsorship is in honor of _____

For sponsorships in honor of an individual, please provide the following information on the honoree so that we can send them a picture and periodic updates on the child being sponsored in their honor.

Address: _____

City / State / Zip: _____

Country: _____

Email: _____

* * * * *

Hand of Hope Ministries promises to provide a photo and brief history of the child(ren) you are sponsoring. Updates regarding your child(ren) will be given to you periodically throughout the year.

THANK YOU for making a difference in the life of a child.

Hand of Hope Ministries P.O. Box 293341 Nashville, TN 37229 U.S.A.