



YES! You can count on me each month to help 40 Days for Life save more lives

My monthly pledge (beginning in 30 days)

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> \$1,000/month | <input type="checkbox"/> \$500/month | <input type="checkbox"/> \$250/month |
| <input type="checkbox"/> \$100/month | <input type="checkbox"/> \$50/month | <input type="checkbox"/> \$40/month |
| <input type="checkbox"/> \$25/month | <input type="checkbox"/> \$10/month | <input type="checkbox"/> Other: \$_____ |

Name: _____

Street address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

- Please send a monthly statement and I will mail my pledge
- Please charge my credit card each month for my pledge:

Card number: _____

Exp. date: _____ CVC (3-digit code) _____

Signature: _____

- Visa
- MasterCard
- Discover
- American Express

Your pledge can be adjusted or cancelled at any time by using this address or emailing info@40daysforlife.com

Please mail this form and your donation to:

*40 Days for Life
4112 East 29th Street
Bryan, TX 77802*