



PO Box 286
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hclil.org
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I WOULD LIKE TO BECOME A FOUNDING MEMBER OF THE 10:10 SOCIETY

- Give Life:** \$1,000 per year for 5 years
- Grow Life:** \$5,000 per year for 5 years
- Guard Life:** \$10,000 per year for 5 years

I WOULD LIKE TO CONTRIBUTE IN OTHER WAYS

- Contribute \$_____ for _____ years.
- Please contact me. I have other thoughts to share.

PAYMENT

- My check is enclosed, made payable to: Hope Life Center
- Please charge \$_____ to my Credit Card # _____
Exp. _____ CSV # _____
- Please contact me about paying my pledge with stock.
- My company will match my gift.

What payment schedule do you prefer? Annual Quarterly Monthly Other/TBD

What month do you plan to make your first/next payment? _____

Signature _____ Date _____

CONTACT INFO

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Alt Phone _____

Email(s) _____

Church/Organization Affiliation _____

“I have come that they may have life, and have it to the full.” John 10:10