



SPONSOR A CHILD GOAL:

Each child sponsored at \$120 a month

**Be part of your child's support team by
committing to \$30 a month!**

Yes, I want to make a difference in a child's life!

Name _____
Organization (if applicable) _____
Mailing Address _____
City _____ State _____ Zip Code _____ Date _____
Phone Number _____ Email Address _____

I would like to sponsor (check all that apply):

- Boy Girl
 3-5 years 6-9 years 10+ years
 A special needs child Any child who needs extra support

Any other comments regarding who you would like to sponsor: _____

- I will sponsor a child and send the following gift amount \$ _____ per month
 I would like to make a one time donation to Emmanuel Ministries Children's Home for \$ _____

Please mail this form and method of payment to:
Emmanuel Ministries P.O. Box 147 El Paso, TX 79942
Tax-deductible gifts can be written to Emmanuel Ministries ("sponsor a child" in the memo) and an annual receipt will be sent to you.

Thank you for your support! Your financial gifts make a difference!