

Family
Life
Campaign
Promise



Blue Water Pregnancy Care Center

BWPCC • 730 Griswold Street • Port Huron, MI 48060 • 810.985.4673 • www.bwpcc.info

Promise: I commit to a **Leaf** gift of \$1000

I would like to give a different amount: \$ _____

Payment:

My check is enclosed made payable to BWPCC

My company will match my gift.

Please charge my Visa/MC/Discover # _____ exp. _____

Please contact me to pay my pledge by automatic bank transfer (savings or checking) or credit card

I will pay my pledge on a different schedule Monthly Quarterly Other: _____

Name: _____ Organization: _____

Address: _____

City: _____ ST: _____ Zip: _____

E-mail Address: _____

Day Phone #: _____ Evening Phone: _____

BWPCC is a non-profit 501(c)3 organization. All gifts are tax deductible.