

Member Giving Program

Hope Church has some good news to share! Your gifts made through our Member Giving Program work harder than ever to support our church. Our Member Giving Program is convenient, as well as safe, secure, and reliable!

When you participate in our Member Giving Program, your gift will be transferred conveniently from either your checking or credit card account directly to Hope Church. A record of each gift will appear on your checking account or credit card statement. As a participant of the program, you are still free to make additional gifts by check or cash as the Lord provides!



CONTACT

Name(s) _____
Company _____ Title/Position _____
Address _____ Country _____
City _____ State _____ Zip Code _____
Telephone (____) _____ Email _____

GIFT INFORMATION

Please process my gift:

- ☐ One-time
☐ Weekly
☐ Monthly
☐ Quarterly
☐ Annually

Please process my first gift on:

____/____/_____
(mm/dd/yyyy)

Please process my last gift on:

____/____/_____
(mm/dd/yyyy)

Please process my Monthly, Quarterly, or Annual gift on the:

- ☐ 1st
☐ 5th
☐ 10th
☐ 20th
☐ 25th

Please apply my gift to:

- | | |
|---|--|
| <input type="checkbox"/> Tithes and Offerings | <input type="checkbox"/> Hope Kids |
| <input type="checkbox"/> Benevolence | <input type="checkbox"/> Missions |
| <input type="checkbox"/> Building and Equipment | <input type="checkbox"/> Vision 72 Fund |
| <input type="checkbox"/> Guest Speaker | <input type="checkbox"/> Other (specify in comments) |

\$_____ Gift Amount

Comments: _____

PAYMENT INFORMATION

- ☐ **Enclosed is a voided check for my gift.** Please transfer my gift from my checking account. **OR**
☐ **My credit card information.** Please transfer my gift from my checking or credit card account



Credit Card Number _____ Expiration Date ____/____/____

- ☐ **Yes! Please add the 3% Credit Card or \$0.25 ACH Processing Fee assessed to Hope Church for me.**

I understand my future gifts will be transferred directly from my account as stipulated above. I understand that I may increase, decrease, or suspend my gift any time through the online donation form at www.hopechurchmovement.com or by contacting the church by phone or mail. All gifts provided to Hope Church comply with U.S. law.

For Office Use Only
\$_____ **Processing Fee Amount** (3% for Credit Card gifts or \$0.25 amount Checking Account gifts)
\$_____ **Total Donation Amount (required)**
(Donation Amount specified above + Processing Fee)

Signature (Required) _____ Date _____

Please make a copy of this form for your records, or you may also request a copy from:

Hope Church • P.O. Box 7336, Tempe, AZ 85281
(480) 560-2277 • hopechurchmovement.com