

PINE LAKE CHRISTIAN CAMP

SUPPORT PLAN

I would like to become a member of the Monthly Support Plan. I pledge my ongoing support to help provide a camping experience for our children in the amount: (please circle)

\$10.00 per Month \$25.00 per month \$100.00 per month Other_____.

Name:_____.

Address:_____.

City/Town_____.

Method of Payment:(please circle)

Twelve(12) post dated cheques visa mastercard

Card Number:_____.

Expiry Date:_____/_____.

Signature:_____.

I understand that I may change or cancel my Pine lake Support Plan at any time.

I am unable to join the Plan at this time, but here is a single contribution of \$_____.

please send support info. to:

Pine Lake Christian Camp

Box 41 Pine Lake Ab.

T0M-1S0

all info will remind private and confidential