

# The Hope Heroes Program



## 2 Ways to Become a Hero

### Hope Hero

Donate \$25 or more monthly as an individual or family.

### Corporate Hero

Donate \$100 or more monthly as a business or organization.

### Your Monthly Donation can help with:

- Camper Scholarships
- Art/Craft Supplies
- Program Development
- Summer and Spring Camps
- Retreats & Social Events
- Horse Riding Program

### More Information

[info@hopehollowms.org](mailto:info@hopehollowms.org)

(601) 859-5290

## HOPE HOLLOW MINISTRIES

### AUTHORIZATION FOR AUTOMATIC PAYMENTS

**Bank Draft** (Complete this section if you are requesting monthly giving by Bank Draft)

Name: \_\_\_\_\_

(as it appears in financial institution records)

Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

ROUTING # \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

I hereby authorize the Financial Institution named above to pay my monthly contribution in the amount of:

\$ \_\_\_\_\_ on the \_\_\_\_ 1<sup>st</sup> OR \_\_\_\_ 15th of each month by charging each payment to my account and to make that deduction payable to the order of Hope Hollow Ministries. I agree that each payment shall be the same as if it were an instrument personally signed by me. This authority is to remain in effect until revoked by me in writing. In addition, I have the right to stop payment of a charge by timely notification prior to charging my account. I understand, however, that both the Financial Institution and Hope Hollow Ministries reserve the right to terminate this payment plan (or my participation).

SIGNATURE: \_\_\_\_\_

Date: \_\_\_\_\_

MM/DD/YYYY

Your Contribution to the Hope Hollow Heroes Program is Tax Deductible

Hope Hollow Ministries is a 501(c)(3) non-profit organization