



Home of the Good Shepherd Ministries Inc. — *Donation Form*

Web: www.hgsbrazil.org

Email: info@hgsbrazil.org

Phone/Fax: (204) 275-7829

Mail: PO Box 34127, RPO Fort Richmond, Winnipeg, MB, R3T 5T5

Name: _____

Email: _____ Phone: (____) _____

Mailing Address: _____ City / Town: _____

Province: _____ Postal Code: _____

My Donation Is Designated To:

- Child Sponsorship (\$35/Child Per Month)* *Operational* *Building Project*
 Ursusla's Children's Home (Amiguinho Feliz) *Randy & Carla*

One Time Gift *Cash* *Cheque*

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Monthly Donation *Automatic Bank Withdrawal* *Post-Dated Cheques*
(See Below)

"I authorize Home Of The Good Shepherd Ministries Inc. to debit my bank account for
\$_____ per month from the account specified on the attached void cheque, starting
____ / ____ (MM/YYYY)." *(*This authorization may be cancelled upon one month written notice)*

Please withdraw funds on: 1st of the month 15th of the month

Signature: _____ Date: _____

****Please return completed form along with donation or void cheque to:***

Email / Scan: info@hgsbrazil.org

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Mail: Home Of The Good Shepherd Ministries Inc.
PO Box 34127, RPO Fort Richmond
Winnipeg, MB, R3T 5T5