

CP #:____

COVENANT PARTNER FORM

I am committing to be a covenant partner though financial support and prayer.

Covenant Partner's Information PLEASE PRINT/TYPE

Full Name	First	Middle	Last
Street Address			
City	State		
Postal/Zip Code			
Country			
Telephone Contacts	Home	Business	Mobile
Fax			
Email Address			

Committing to become a Covenant Partner with RICARDO GRANT MINISTRIES you are becoming apart of taking the gospel of Jesus Christ to the world, through literature, broadcasting, missions, outreach and crusades.

✓ PLEASE TICK THE APPROPRIATE ONE

I want to become a covenant partner with a monthly gift of: \$	\$10 \$20 \$50
I want to become a covenant partner with a yearly gift of: \$120	\$240\$600
I want to sow a one-time gift of:\$200\$:500\$:100	0 <u>Other :</u>

I plan to make this contribution in the form of \Box cash \Box check \Box credit card

Contributions via Credit Card please fill out below.

Contribution Amount \$_____

	Credit Card Type	□VISA	□MASTERCARD	□AMERICAN EXPRESS	DISCOVER
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Credit Card No. CSC or CSV #

Expiration Date____/____

Signature Authorization_____

Please make checks, corporate matches or other gifts payable to:

Ricardo Grant Ministries Andros Dr. Hawksbill P.O. Box: 44747 Freeport. Grand Bahama, The Bahamas 1-242-351-6399