




Rider Name: _____

Donor's full address is required for tax receipts
 Cheques are payable to **Hope Awaits Ministries**
 Donations less than \$20 will not be accepted.

PLEDGE FORM

AMOUNT

Donor name			
Address	City	Postal	
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Address	City	Postal	
			<p>Total:</p>
<p>Address: 390 First Ave E. North Bay, Ontario, P1B 1K1 Charitable Number: 82714 6036 RR0001 Email: contactus@hopeawaitsministries.com Phone: 705-494-5465</p>			