

## Yes, I want to be a **Partner** with **BCV!**

### STUDENT SUPPORT *(not tax deductible)*

Students in biblical programs training for ministry, mission and marketplace -

\$..... (single gift now) or  \$..... per month/quarter

Student support Mission Aviation Training

\$..... (single gift now) or  \$..... per month/quarter

### LIBRARY FUND *(tax deductible)*

\$..... (single gift now) or  \$..... per month/quarter

### BUILDING FUND *(tax deductible)*

\$..... (single gift now) or  \$..... per month/quarter

Title:  Name:  Surname:

Address:

Postcode:

Tel:  Email:

### PAYMENT DETAILS

Single gift of \$ \_\_\_\_\_

Gifts of \$ \_\_\_\_\_ per month or \$ \_\_\_\_\_ per quarter

Cheque enclosed for \$ \_\_\_\_\_

CREDIT CARD OPTION:  Mastercard  Visa  Bankcard

Name on Card \_\_\_\_\_

Card No:  Expiry Date \_\_\_\_ / \_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please send me information about including BCV in my Will.

Please send me information about BCV training.