New Life Youth Short Term Mission Donation Form

Name			
Address	City	State	Zip code
I/We are contributing for the follo	owing trip: Participant	Amount _	
Please send all donations payable	e to:		
New Life Church Attn: Sho 467 N. Easton Rd Glenside, PA 190			
Please put "youth summer missic funds donated will be used for a f	ns" in the memo section. In the unliluture youth mission trip.	kely event of cancell	ation of a mission trip, all
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Please put "youth summer missions" in the memo section. In the unlikely event of cancellation of a mission trip, all funds donated will be used for a future youth mission trip.