

Please complete and mail form along with your donation to:

Gary Christian Center
P.O. Box 15115
Gary, IN 46409

GENERAL INFORMATION:

Name: _____

Address: _____

City/State/Zip: _____

Country: _____

Phone: _____

Email: _____

TYPE OF DONATION:

Tithes: ___ Offering: ___ Building Project: ___ Other: ___

TYPE OF PAYMENT:

Check: ___ Money Order: ___