

KIDS KAMP BELIEVERS

• • DONATIONS • •

I/WE BELIEVE IN KIDS KAMP!

PLEASE ACCEPT MY/OUR DONATION:

- \$5,000+ **True Believers**
- \$1,000 **Genuine Believers**
- \$500 **Faithful Believers**
- \$250 **Devoted Believers**
- \$100 **Loyal Believers**
- \$50 **Friendly Believers**
- \$ _____ **Contributing Believers**

Who should be recognized as the Kids Kamp Believer for this donation?

Anonymous

Enclosed is my/our check for \$ _____
*Please make all checks and money orders payable to
Trinity Equestrian Center Kids Kamp.*

Please charge my credit card \$ _____
 One-time Monthly Quarterly Annually
 Mastercard Visa Exp. Date _____

Name on card _____

Card Number _____

Signature _____

Date _____

Please send a receipt for my/our donation.

Name: _____

Organization: _____

Address: _____

City/State/Zip: _____

Telephone: _____

E-mail: _____

Thank you for supporting Kids Kamp!

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