



DONATION FORM

I want to support the Resource Center for Women and Ministry in the South.

Name: _____

Address: _____

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Email Address : _____

I am making a tax-deductible contribution in the amount of:

\$10,000 \$5,000 \$1,000 \$500 \$100 \$50 other

My check made payable to RCWMS is enclosed.

Please charge my VISA or MasterCard.

Card number _____

Exp. date: _____ Signature _____

I would like to contribute frequent flier miles. Please contact me.

Mail to: RCWMS, 1202 Watts Street, Durham, North Carolina 27701