



**YES! I will help support the ministry of Teen/Life Challenge**

Enclosed is my gift of \$\_\_\_\_\_

and / or

I Plan on Sending \$\_\_\_\_\_

Check One:    Monthly    Quarterly    Annually

**Name(s)**\_\_\_\_\_

**Home Address**\_\_\_\_\_

**City**\_\_\_\_\_ **State**\_\_\_\_\_ **Zip**\_\_\_\_\_

**Phone**\_\_\_\_\_

**Email**\_\_\_\_\_

**Make check(s) payable to: Teen/Life Challenge and mail to:**

Teen Life Challenge of Dallas

PO Box 181794

Dallas TX 75218-8794