

Donor Event Giving Card

Yes, I want to partner with Tōtara Springs Christian Centre

Name: _____

Address: _____

City: _____ Postal Code: _____

Telephone: _____

Email: _____

*Tōtara Springs is registered with Charities Services and is eligible for donor status.
Tōtara Springs Christian Centre Limited CC56824.*

I want to be a monthly partner (please follow the instruction for single gift below):

I pledge \$ _____ /months for _____ months.

I would like to give a single gift.

I will make a direct deposit.

Please use the following details:

Account number: 02-0316-0572654-00 Reference: Donation

I will make my payment online.

Go to <https://www.totarasprings.org.nz/page-donation/> and click Donate Online.

Please apply this gift to:

Cabin Project

Internship and Leader Development

Holiday Camps Scholarship

Funding the Banquet <https://donorbox.org/banquet-2022>

General Operating Expenses

Thank you for helping spread the gospel throughout Aotearoa by supporting Totara Springs Christian Centre. We praise God that He has brought you alongside. Your partnership is an encouragement and a blessing!