

Bethel Neighborhood Center - NEW PLEDGE FORM



PLEASE PRINT

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

EMAIL _____

Total NEW gift amount

\$ _____

To be fulfilled as follows: (Please choose and complete one)

One-time gift Quarterly Monthly
\$ _____ \$ _____ \$ _____

Our New Mailing Address

Bethel Neighborhood Center
PO BOX 171637
Kansas City, KS 66117

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