## DATE: **ABBA Helps Partners Form** PERSONAL INFORMATION Full Name: Phone: Email: **ADDRESS Present Address:** City: State: Zip Code: PLEASE CHECK TO SEE WHERE YOU'RE LED TO SUPPORT ABBA HELPS: 1. PRAYER PARTNER Join the prayer team?: YES NO 2. HELP PARTNER Volunteer at the ABBAs Ranch?: YES \*\*IF YES , PLEASE PLEASE FILL OUT THE ATTACHED VOLUNTEER FORM, BACKGROUND CHECK WILL BE REQUIRED FOR ALL VOLUNTEERS AT THE ABBAS RANCH \*\* 3. FINANCIAL PARTNER: ONE TIME GIFT: **MONTHLY GIFT:** \$ CHECK: \$ CASH: \*\* PLEASE WRITE TO ABBA HELPS \*\* \$ **CREDIT CARD: CARD NUMBER: EXPIRATION DATE: CVC NUMBER:** \*\* FILE WILL BE KEPT ON A SECURED PLACE \*\* WE WOULD LIKE TO PRAY FOR YOU, PLEASE LET US KNOW HOW WE CAN PRAY:

## THANK YOU SO MUCH!