



A COVENANT OF CARING

I/We _____, member(s) of

(Congregation)

(Parish)

and a partner to all in the body of Christ, make a commitment of love to aid

(Congregation or Special Ministry)

(Parish or Locality)

so that the message of the Gospel may reach all people, and that this congregation may be able to minister to the care of those in this location.

I/We pledge \$25____, \$50____, or \$____ monthly
for a one-year commitment

(Congregation President)

Date

Thank you for completing this form and mailing to:
MISSION PARTNERS, The Virginia Synod, P. O. Drawer 70, Salem, V 24153

Also Please submit all money to the Virginia Synod along with
your monthly Churchwide Mission and Ministry support,
and indicate the amount and name of your Mission Partner.