



**There are many ways to make a donation to support HOPE. Please choose from the options below.**

- Pay by check. Enclosed is a check in the amount of \$\_\_\_\_\_ (Please make checks payable to House of Peace & Education, Inc.)
- Charge my credit card a one-time payment of \$\_\_\_\_\_ or q monthly payments of \$\_\_\_\_\_ for 12 months
- Credit Card Information:  Visa  MasterCard  Discover

Number\_\_\_\_\_

Expiration Date\_\_\_\_\_

Signature\_\_\_\_\_

- q Deduct from my checking or savings account a onetime payment of \$\_\_\_\_\_ (Please see debit authorization form on reverse)
- Deduct from my checking or savings account recurring monthly payments of \$\_\_\_\_\_ for 12 months (Please see debit authorization form on reverse)
- Sustaining Membership:** I would like this pledge to automatically renew annually and I authorize HOPE to charge my credit card, checking or savings account in the amount specified above until I contact HOPE to change or stop my donation.

This gift is  In Honor of *or*  In Memory of  
(name)\_\_\_\_\_

Please notify  
(name)\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_

Zip\_\_\_\_\_

Your Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_

Zip\_\_\_\_\_

Email Address\_\_\_\_\_

- You may list my name in public  I prefer to remain anonymous

**Mail to: House of Peace & Education, 20 Barthel Avenue, Gardner, MA 01440**  
*Thank you for bringing HOPE to women, children and families in need.*

*Donations are deductible to the extent allowed by law.*



HOUSE of PEACE & EDUCATION, INC.  
LEARN • BELIEVE • SUCCEED

**Debit Authorization** from my Checking/Savings Account: Make a one time or recurring donation through your savings or checking account. Simply complete the Debit Authorization form below and GFA Federal Credit Union will manage donations from your financial institution to HOPE.

I authorize the GFA Federal Credit Union to initiate debit entries to my account indicated below and the financial institution named below to credit the same to such account for my pledge payment to House of Peace & Education, Inc. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

Name of Financial Institution \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_

Routing Number \_\_\_\_\_

Account Number \_\_\_\_\_

Account Type:  Checking  Savings

Please Debit \$ \_\_\_\_\_

Start Date: \_\_\_\_\_ Total Pledge \$ \_\_\_\_\_

*Transactions will occur on the 15th of the month.*

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Please print*

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_