ASCENSION MINISTRIES INTERNATIONAL
MAIL-IN PARTNERSHIP FORM

"I thank my God every time I remember you. In all my prayers for all of you, I always pray with joy because of your *partnership* in the gospel from the first day until now."

Philippians 1:3-5 NIV

☐ Yes, I would like to become an Ascension Ministries Partner.

☐ Yes, I will support the work of Ascension Ministries through prayer and financial offerings as the Lord leads me.

Personal Information

Name:_____
(First) (MI) (Last)

Address:_____

City:_____ State:_____ Zip:_____

Country:_____ Province:_____

Home Telephone:_____ Mobile:_____

E-mail:_____ Website:_____

Spouses Name:_____
(First) (MI) (Last)

Children's Names:_____

Signature Date

Briefly explain why you want to become an Ascension Ministries Partner:(Use back side if necessary)

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