



Donation Submission Form

Please complete all fields below and return this form to Children's Hunger Fund along with your check.

Church Name

Street Address

City

State

Zip Code

Church Email

Church Phone

Pastor Name

Contact Name

Contact Email Address

Contact Phone

Check here if your church DOES NOT wish to receive important updates about CHF.

Goal Reached

Check One	Amount	Category	Benefits
<input type="checkbox"/>	\$100 - \$499	Incredible Investor	Certificate of appreciation + your group listed on CHF's website.
<input type="checkbox"/>	\$500 - \$999	Fantastic Fundraiser	Certificate of appreciation + your group listed on CHF's website + opportunity to be featured on CHF's social media channels.
<input type="checkbox"/>	\$1,000+	Amazing Ambassador	Certificate of appreciation + your group listed on CHF's website + opportunity to be featured on CHF's social media channels + mentioned in CHF's digital newsletter.

Amount Raised: \$ _____ ^{x4} can send _____ meals!

Make checks payable to:



Include in memo:
FORGED IN HOPE

Mail to:
Children's Hunger Fund
Dept. LA 24373
Pasadena, CA 91185-4373