



## Ambassadors Program Commitment Form

Yes, I want to help Africans in need through IFESH's life-changing programs! Here is my \$2,000 gift to the Ambassadors Program.

### Donor Information (please print or type)

<b>Pledge Information</b>	<input type="checkbox"/> Enclosed is a check for \$2,000 <input type="checkbox"/> Bill me for 4 quarterly payments of \$500 <input type="checkbox"/> Bill me for 12 monthly payments of \$167
	<hr/> <input type="checkbox"/> Please charge my credit card: <input type="checkbox"/> One time (\$2,000) <input type="checkbox"/> 4 quarterly payments (\$500 each) <input type="checkbox"/> 12 monthly payments (\$167 each)
<b>Name</b>	
<b>Billing address</b>	
<b>City</b>	
<b>State</b>	
<b>ZIP Code</b>	
<b>Telephone (home/cell)</b>	/
<b>Telephone (business)</b>	
<b>E-mail address or Fax #</b>	
<b>Credit card type (circle)</b>	AMX    VISA    MC    DISC
<b>Credit card number</b>	
<b>Expiration date</b>	
<b>Signature/Date</b>	Date:

Donations may also be made at [www.ifesh.org](http://www.ifesh.org)

Thank you for your generosity. All gifts are tax-deductible as allowed by law. Please make checks payable to:

IFESH, 5040 E. Shea Boulevard, Suite 260, Scottsdale, Arizona, 85254-4687