



www.standinginthegap.us/alumni/

Please fill out the following information and check all that apply.

Name:

Current Address:

Phone Number:

E-Mail Address:

Yes I would like to become an official member of the Standing In the Gap Alumni Association.

No I would not like to become an official member of the Standing In the Gap Alumni Association, but I would like to continue to have information.

I would like my name and contact information dropped.

Giving:

I would like to support Gap by receiving prayer requests.

I would like to give a one-time gift for \$_____ toward:

- Gap/New Life Missions
- Gap Retreats
- General Gap Fund
- Men's Housing Fund
- Future Ministries

Please make all checks out to "Standing In the Gap" and designate in the memo section where you would like the money to go, or else we will decide how to best use it.