



North Country Mission of Hope

Working Together to Improve Lives

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www.ncmissionofhope.org

ADOPT A SCHOOL SPONSOR PAYMENT OPTION FORM

Sponsor Name: _____
 PLEASE PRINT

Mailing Address _____
 (street)

 (city) (state) (zip)

Phone # () _____ **Email address** _____
 PLEASE PRINT

Adopt a School Sponsorship opportunities:

		Please Check Off
Opportunity 1	School Population 25-75 students	\$550 _____
Opportunity 2	School Population 76-150 students	\$850 _____
Opportunity 3	School Population 151-350 students	\$1,500 _____
Opportunity 4	School Population 351-500 students	\$2,000 _____
Opportunity 5	School Population 500 – 750 students	\$3,000 _____
Opportunity 6	Annual Salary For Female Cook	\$1,700 _____
General Donation to the Food Program, please write in amount		_____
Total donation		\$ _____

PAYMENT OPTIONS:

Option 1 – One time payment (check to be enclosed with this form) *payable to:* Mission of Hope; please write “Food Program” on the memo line.

OR

Option 2 - Monthly Automatic debit from your checking/savings account:

Total donation (from above) divided by 12 = \$ _____
Monthly ACH bank fee \$ 1.00
 Total monthly Automatic debit ** \$ _____

Please click this link to download the ACH Authorization form for auto-deduction.

The *monthly debit would be on the 15th* of each month as stated on the ACH Authorization form and continue until revoked in writing. If the 15th falls on a weekend or holiday, the monthly sponsorship amount may be debited the first business day following the 15th.

Many thanks for your continued support of the Mission and your donation to the “Adopt a School Program” that feeds over 6,500 children! Every donor will receive a letter from the principal, photographs of the school children and letters from the school children.