



Twin Pines Camp, Conference & Retreat Center

3000 Twin Pines Camp Road, Stroudsburg, PA 18360

SUMMER STAFF • SHARED SUPPORT PROGRAM • DONOR CARD

Amount of Shared Support Gift: \$ _____

Name of Staff Person Your are Supporting: _____

Name of Donor: _____

Your Complete Mailing Address: _____

Your Email Address: _____

Check here if you DO NOT want to receive updates about the ministry by email.

Please Make Check Payable to: Twin Pines

All Gifts are Tax Deductible and a Receipt will be issued to you as the donor.

(All monies and this card are to be returned to the summer staff member you are supporting. The summer staff member will submit all contributions to Twin Pines at one time.)

To learn more about the ministry you are supporting, go to: www.twinpines.org

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