Thank you for committing to covenant with a Global Ministries' missionary! Your prayers, presence, gifts, service and witness will bless you and the missionary as you journey together to fulfil the mission of God.

Tell us a bit about yourself.					
First Name	Last Name		Phone		
Home Address					
City		State		Zi	p
Email Address	Are you	the main (	Contact Person	n for the mi	issionary? O Y O N
How would you like to covenant?					
Church Individual Other (pl	ease describe)				
Start Date of Covenant			Length of Co	venant: 🔘	1yr 2yrs 3yrs
Missionary			_ Advance #		
your church is able) a year ar  Total Financial Commitment		_		у	
Tell us a bit about your church or on the Name of Church/Group/Organization		to be aler	ted to your gif	t)	
Address					
Phone	Annual Conference				
Senior Pastor/Executive Director Nam	e				
Church/Org. Email Address					
Mission Committee Chairperson					
Chairperson Email Address					
Primary Contact (if not you)					
Primary Contact Email Address					
Submitting this form: Email: cover	nant@umcmission.e	org Mail:	Global Ministr	ies, Itinerati	ion Team, 458 Ponce

**Giving Financial Gifts**: **Web**: umcmission.org/give-to-mission/covenant-relationships **Mail**: Advance GCFA, P.O. Box 9068, New York, NY 10087 (clearly designate missionary's advance number or name in the memo line)



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