

HOFFMANTOWN CHURCH

Application for One-Time Mission Support

<input type="checkbox"/> Member of Hoffmantown	<input type="checkbox"/> Non-Member
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PERSONAL FAMILY INFORMATION

(Please type or print)

DATE _____ / _____ / _____

Name

First: _____ (M): _____ Last: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

E-mail address: _____

MINISTRY/SUPPORT REQUEST

Ministry Name: _____

Ministry website: _____

Please provide a brief overview of your ministry and what your Mission Statement is:

Your Country of Service: _____ Locality: _____

Type of Service:

Area of ministry (check as many as apply):

- Foreign field (location) _____
- Home field (location) _____
- Local – Albuquerque area

Type of ministry: (please check your "primary" mission – What do you spend most of your time doing?)

- Preaching ministry
- Teaching/Education ministry
- Benevolence ministry
- Counseling ministry
- Medical ministry
- Social ministry
- Church-planting ministry
- Other ministry _____

Please provide a statement on what kind of support you need. (Funding goal, a specific item of equipment, event support, etc.)

MISSION BOARD/MONTHLY SUPPORT INFORMATION:

If support is approved by the Mission Council, where should the support be sent to?

Name of Board: _____

Mailing Address: _____

Phone: _____ E-mail: _____

Is this organization a US-IRS 501c3 org. or recognized in the USA? Yes No

ADMINISTRATIVE INFORMATION

Please complete this application and return to:

Hoffmantown Church

8888 Harper Dr. NE

Albuquerque, NM. 87111

Attention: **Hoffmantown Missions Pastor/Director**

Pastor of Missions and/or Director of Missions

Email: Missions@hoffmantown.org

Phone: 505-858-8654

Missions Administrative Assistant

Email: Missions@hoffmantown.org

Phone: 505-858-8660