



## Hand of the Shepherd

**Please complete this Hand of the Shepherd form and return it to Loving Shepherd Ministries, PO BOX 375, Bluffton, IN 46714. Thank you for changing a child's future!**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Yes, I would like to become a Hand of the Shepherd**

Monthly Contribution Amount: \$\_\_\_\_\_/month (minimum of \$25/month)

Home of Hope preference (choose one):  Ethiopian AIDS Orphans  Ethiopian Exploited Girls  
 Any Home in Ethiopia  Any LSM Home of Hope around the world

*Please select **one** of the 3 convenient methods to become a Hand of the Shepherd:*

### **Credit Card**

Name as it appears on the card: (please print neatly) \_\_\_\_\_  
Credit Card Type (circle one): Visa Mastercard Discover  
Card Number: \_\_\_\_\_  
Exp. Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

### **Electronic Funds Transfer**

Bank Name: (please print neatly) \_\_\_\_\_  
Account Number: \_\_\_\_\_  
What type of account (circle one): Checking Savings  
Routing Number: \_\_\_\_\_  
Signature: \_\_\_\_\_

### **Check**

To sign-up via check, make the check amount equal to your monthly pledge and make it payable to "LSM."  
Send the check to LSM, PO Box 375, Bluffton, IN 46714.

**I would like to make a one-time donation to LSM's work in Ethiopia**

I would like to make a one-time donation to Loving Shepherd's work in Ethiopia for (please circle one):  
\$50 \$100 \$250 \$500 \$1,000 (different amount) \_\_\_\_\_

I've included a check written to Loving Shepherd Ministries. *Please write "Ethiopia" on the memo line.*

Please charge my credit card.

Name as it appears on the card: (please print neatly) \_\_\_\_\_  
Credit Card Type (circle one): Visa Mastercard Discover  
Card Number: \_\_\_\_\_  
Exp. Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

**Please send this completed form to LSM, PO Box 375, Bluffton, IN 46714.**