



Dear _____,
 I am / We are excited about your opportunity to be impacted at CruWC!!
 I / We'd like to help you get there!
Enclosed is my / our gift of:

- \$50 \$75 \$100
 \$ _____

Name: _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Phone: _____
 E-Mail: _____

Please make Checks Payable to:
Campus Crusade for Christ
100 Lake Hart Dr.
Orlando, FL 32832-0100

Or: You can give by credit card or a bank account transfer (EFT) safely & securely online: **Go to: donors.miupcru.org**
 Pick the school scholarship fund; Select gift amount; at bottom of box it says "optional comments" add student's name in that box.

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