



WILLIAM JESSUP UNIVERSITY

OFFICE OF CAMPUS MINISTRIES
333 SUNSET BOULEVARD
ROCKLIN, CA 95765
916.577.2321
WWW.JESSUP.EDU

YES! I'd like to support _____
on his/her mission trip to _____ through:

- Prayer
- Financial Support \$ _____

PLEASE NOTE: Checks should be made out to **WJU** and the **student's name should not appear on the check.** **Team contributions are non-refundable** and any over amounts raised will spill into the team's general fund and/or general mission fund. *All contributions are tax deductible.*

Your Name _____ Email _____

Your Address _____

Your Phone Number _____

Please check here if you would **not** like to receive future WJU communications.



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