Donation Form

IN HONOR OF:			
	OR		
IN MEMORY OF:			
	PLEASE INFORM:		
First Name:	Last Name:		
Address:			
City:			
	GIVEN BY:		
First Name:	Last Name:		
Address:			
City:	State:	Zip:	
Telephone:	Cell Phone:		
	Amount: \$		

Please Contribute This Donation To (Check One):

- o The Rowe Building Fund
- o The Read Music Fund
- The Wisznat/LaFave Scholarship Fund
- o The MCC Memorial Fund
- o The Church Operating Fund

(Return this form and check payable to "Margate Community Church" to MCC, 8900 Ventnor Avenue, Margate, NJ 08402)