

Response Form

I would like to help the organization:

I am giving a gift of _____

for _____

I will pray

I would like to partner in _____

I would like to:

Share information with other likeminded people, institutions and churches.

Receive information about a specific project:

*Receive **Share and Care E-Newsletter** regularly*

Name: _____

Organization: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

Please complete the form and return to:

Executive Director
SHARE AND CARE NEPAL
P.O.Box 10657, Kathmandu, Nepal
Tel 977-1-5538577
Email: edo@share-care.org
Website: www.share-care.org