Mission Trip Support Form

Short-term mission teams of ASON International



Dear ASON:

We would like to support the short-term mission ministry of

Team member: _____ to _____
(destination)

- ☐ We are enclosing a check payable to ASON International. We understand all funds sent for this team member will be applied to their mission team fund; any funds received beyond their needs will be applied to the needs of other team members and to needs on the field.
- ☐ We are praying for this team.

Name: _____

Address: _____

City / State / Zip: _____

Giving by check

Make checks payable to ASON International and mail with this form to:
ASON International · PO Box 6, Fort Pierce, FL 34954

Giving by credit card?

Give online at ason.org/donations

Enter the team member's name in the description so your gift is applied to their fund. For your security, please do not write card numbers on this form or send them by mail.

All gifts are tax deductible. Please do not write the team member's name on the check (IRS rules); this form ensures your gift reaches the correct fund.

FOR FLORIDA RESIDENTS: A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE WITHIN THE STATE, 1-800-435-7352. PLEASE REFER TO REGISTRATION NUMBER CH2674. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. ALL DONATIONS TO ASON ARE INCOME TAX DEDUCTIBLE, NON-REFUNDABLE, AND MADE WITH THE UNDERSTANDING THAT ASON HAS COMPLETE DISCRETION AND CONTROL OVER THE USE OF ALL DONATED FUNDS.

CUT ALONG DASHED LINE

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