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: _____

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

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.

Giving by credit card?

Give online at ason.org/donations (enter the team member's name in the description so funds are applied correctly) or complete this section:

Please charge my card $ _____ to support _____
(team member's name)

Card number: _____

Expiration date: _____ CVV (3-digit): _____

Name on card: _____

Phone: _____

Email: _____

Signature: _____ Date: _____

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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