



YES! Please sign me up for Health Volunteers Overseas' Giving Program!

You can share in our commitment to improving global health through education. When you participate, your donation will be transferred conveniently each month from your checking account or credit card directly to Health Volunteers Overseas. Your donation will go even further because our paperwork will be reduced; our income will be more predictable, putting your donation to work immediately to help the people who are served by our mission.

A record of each donation will appear on your monthly bank or credit card statement. You can increase, decrease, or suspend your pledge at any time through the online donation form at www.hvousa.org or by contacting HVO by phone or mail. All donations provided to HVO originating as ACH transactions comply with U.S. law.

Here's how to join . . .

1. Use the lower portion of this form to indicate the total amount you wish to donate to HVO.
2. Be sure to sign your name and date.
3. Return the completed enrollment form with a voided check for your first month's donation or your credit card information.

Please keep the top portion of this form for your records. To request a copy of your donation contact us directly.

Donation \$ _____ on the ____ 1st of the month OR ____ 15th of the month

Health Volunteers Overseas

Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

✧ I'd like to donate \$ _____ to be transferred:
 ____ Monthly ____ Quarterly ____ Semi-Annually ____ Annually ____ One-time

✧ Please process my donation on the ____ 1st of the month OR ____ 15th of the month

Enclosed is a voided check for my first month's donation. Please transfer my donation from my checking account. I understand my future donations will be transferred from my account.

OR

Enclosed is my credit card information. Please transfer my donation from my credit card. I understand my future donations will be transferred directly from my credit card.



Credit Card Number _____ Exp. Date ____/____

I understand my future pledge will be transferred directly from my account as stipulated above and I may increase, decrease, or suspend my pledge at any time through the online donation form at www.hvousa.org or by contacting HVO by phone or mail. All donations provided to HVO originating as ACH transactions comply with U.S. Law.

Signature _____ Date _____

***REQUIRED**