

**Forest Park
MISSIONS TEAM GIVING POLICY**

To receive a tax-deductible contribution statement from Forest Park, please complete this form and include the trip name on the memo line of the check. If the participant's name is on the check we will not be able to send you a tax-deductible contribution statement.

If you do not wish to receive a contribution statement for tax purposes, this form is not necessary. If this is the case, we ask that you include both the participant's name and the trip name on the memo line of the check.

Participant: _____ Trip Name: _____

Contributor: _____ Contribution Amount: _____

Although I have indicated a specific participant to receive the benefit of my contribution, I grant Forest Park complete discretion and control over the use of my donated funds. Should the participant be unable to go on the trip or have sufficient funds already provided, the Missions Team may administer my contribution as needed. I understand that my contribution is non-refundable.

Signature: _____

Date: _____

Forest Park will mail contribution statements quarterly.

Contributor's contact information (please print legibly):

Name: _____ Phone: _____

Email: _____

Street Address: _____

City, State and Zip: _____

Please mail your contribution and completed Missions Team Giving Policy to:

Forest Park
ATTN: Missions
725 S Highview Ave
Joplin, MO 64801

