The GoMix Christian Radio Sustainer's Circle Enrollment and Update Form

Please download and complete this form to enroll as a member of our Sustainer's Circle or to change your existing contribution. When completed please mail it to: Sustainer's Circle, Pathway Ministries, PO Box 1895, Goldsboro, NC 27533-1895. We must have a signed and completed agreement on file in order to enroll you in this program.

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Last Name First Name

OR OFFICE USE ONLY

CREDIT/DEB

CHECKING ACCOUNT

Partner Number

Date:

Monthly Amount

Your name (Exactly as it appears on your charge card or checking	account):	
Your billing or banking address:		
City: State:	Zip:	
Daytime telephone number:	artner number (if kn	own):
Email address:		
SUSTAINING MONTHLY CONTRIBUTION AMOUNT:		
□\$15.00 Sergeant's Club □\$25.00 Captain's Club □\$50.00 M □\$100.00 General's Club □\$ Other monthly amount	ajor's Club □\$75. nt	00 Colonel's Club
CREDIT/DEBIT CARD PAYMENT OPTION: (Your contribut	tion will be billed to	o the following card)
— — — — — —		
□American Express □MasterCard □VISA □Discover		
□American Express □MasterCard □VISA □Discover Account Number:	Expires:	CVV / CSC:
Account Number:	Expires:	CVV / CSC:
		CVV / CSC:
Account Number:		
Account Number: Signature for credit/debit card sustaining contributions:	С	Date:
Account Number:	С	Date:
Account Number: Signature for credit/debit card sustaining contributions: AUTOMATIC BANK DRAFT PAYMENT OPTION: (Your contributions) Please mail us a check for the amount of your forcheck needs to be written from the account you wish to draft	ntribution will be to	vansferred as follows) sontribution. This sontribution be
Account Number: Signature for credit/debit card sustaining contributions: AUTOMATIC BANK DRAFT PAYMENT OPTION: (Your co.)	ntribution will be to	vansferred as follows) sontribution. This sontribution be

Please mail to: Sustainer's Circle

Signature for EFT bank draft contributions:

GoMix Christian Radio

PO Box 1895

Goldsboro, NC 27533-1895