



WNAC Faith Promise Card

Yes, I willingly pledge my faithful support as a
 financial prayer sponsor of the ministry of
Women Nationally Active for Christ.

My financial commitment:

- monthly
- quarterly
- annually

In the amount of \$_____

Signed _____ Date _____

WNAC P. O. Box 5002, Antioch, TN 37011-5002 ph: 1-877-767-7662 Email: info@wnac.org

OPTIONAL BANK DRAFT

I authorize WNAC to charge my bank account in the amount of \$_____
 monthly quarterly annually beginning ____/____/____
and continuing until I notify WNAC in writing to discontinue bank drafts
on my account.

Signature: _____ Date _____

Please enclose a VOIDED check.

KEEP THIS PORTION FOR YOUR RECORDS



By faith, I have made this commitment of consistent
 financial prayer support for the ministry of
Women Nationally Active for Christ.

My financial commitment:

- monthly
- quarterly
- annually

In the amount of \$_____

Optional Bank Draft

My bank account will be drafted in the amount of \$_____
 monthly quarterly annually beginning ____/____/____
and continuing until I notify WNAC in writing to discontinue bank drafts
on my account.

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