



Feed My
Sheep
Ministry, Inc

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Sponsorship Form

Date: _____

Sponsor's Name: _____

Address: _____

Phone Number: _____

Email Address: _____

(sponsorship is \$25 per month (for tuition, books and uniforms for one child to go to school.)

Child Selection: () Boy(s) () Girl(S) () No Preference

Age Range: _____ - () No Preference

TOTAL ENCLOSED: _____

Donation Form

Sponsor's Name: _____

Child's Name: _____

Sponsorship #: _____

Amount for Sponsorship: \$ _____ Amount for Child: \$ _____

General Fund: \$ _____

Ministry Project: \$ _____

Feeding \$ _____

Emergency Medical Fund: \$ _____

Hurricane/Disaster Fund: \$ _____

TOTAL ENCLOSED: \$ _____