

Martin Luther High School Associate Congregational Giving Form

***Please complete and return this form with every check to MLHS from your congregation. Thank you!**

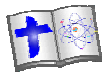
membership support given ___monthly ___quarterly ___semi-annually ___annually

Martin Luther High School Sunday collection

extra donation ___undesigned ___designated for _____ from _____

Here is the name & address of a ___family with a potential MLHS student (or) ___ a potential donor who should be included in Knight Light mailings: _____

Name of congregation



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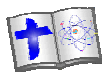
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