Be An Apostle:
Your Monthly Gift Can Change Lives

Our Lord depended on 12 Apostles, who answered his call, “Follow me.” Each contributed whatever humble gifts they could. They supported His mission to bring hope to all — and their devotion still inspires the world.

**Yes! I want to join the Apostles Club and make a monthly donation**

- I authorize CNEWA to withdraw monthly the following amount
  - $25  □ $30  □ $50  □ $60  □ Other $________

Please select one:

- **To be used where the need is greatest** — offering urgent support and funding for those people and programs who most need your help

- **To care for children in need** — funding food, healthcare, education for poor children in CNEWA’s world

- **To support vocations** — help inspire new sisters, brothers and priests, by offering novices and seminarians faith-filled formation to help them bring the Gospel to others

My gift is in memory or honor of __________________________________________

Comment ______________________________________________________________

**GIVE WITH CONFIDENCE**

CNEWA uses only a small fraction of your gift to cover our administrative expenses. We’re committed to using your generosity frugally and well. To view our financial statements for the past five years, visit www.cnewa.org.
PAYMENT METHOD

☐ Check enclosed (payable to CNEWA)

☐ Credit card ☐ MasterCard ☐ VISA ☐ American Express ☐ Discover

Card number ___________________________________________ Expiration Date ___ / ____
Name as it appears on card ____________________________________________
Signature ___________________________ Date ______________

• A tax receipt will be issued for gifts of $10 or more
• Charitable registration # 86775 7502 RR0001

Please complete the following information

Name ____________________________________________________________________________
Address __________________________________________________________________________
City ___________________________ State _________ Zip ___________________________
Telephone ___________________________ Email __________________________

NOT READY TO DONATE YET?

Please send me an:
☐ electronic or a ☐ printed copy of ONE Magazine

WANT TO ADD FRIENDS OR FAMILY TO OUR Mailing LIST?

Enter their name, full address and/or email address

Name ___________________________ Email __________________________
Address __________________________________________________________________________
City ___________________________ State _________ Zip ____________