

**Drepung Loseling Educational Fund
Monk Sponsorship Form**

Sponsor Name: _____
Address: _____

Country: _____
Cell Phone: () _____
Work Phone: () _____
E-mail Address: _____

I WOULD LIKE TO CONTRIBUTE: (In U.S. Dollars)

\$20 Monthly \$60 Quarterly \$120 Semiyearly \$240 Yearly
 Other Amount \$____ Circle One: Monthly / Quarterly / Semiyearly / Yearly
 This sponsorship is for one year only

I WOULD LIKE TO CONTRIBUTE BY:

I'll send check/money order in U.S. funds by mail

Automatic checking account withdrawal.
 Please enclose a voided check. (Note: Must be a U.S. bank account.
 This shows us the necessary bank routing information)

Automatic credit card charge on my VISA MC
 Name as it appears on card _____
 Credit card #: _____ Exp. _____ Secy. Code _____

Please provide your **billing address**, if it is not the same as your mailing address above.

Address	City	State/Prov	Zip Code
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I would like a reminder sent to me Yes No

Signature: _____ **Date:** _____

Please mail to: Drepung Loseling Educational Fund
 1781 Dresden Drive
 Atlanta, GA 30319

Office Use Only	
_____ QB	_____ AI
_____ ACH	_____ CC