Touch a Life

Sponsorship Registration Form

Date				
Child's	Information			
Child's Name:	Pheach Chanty (6912)		Child's Status:	Child's Placement:
Accountability: City: Location: Country: Girl	Setha Say - TAL Prev Veng Prev Veng Cambodia		Orphaned Abandoned Destitute	☐ Traditional Orphanage ☐ Home placement ☐ Touch a Life Center
-	s Information			
Spouse Name				
Address				
City		_ State	Zip	
Home Phone Wo		k Phone		
Email Address_				
If you will be giving your support through your church, what is your church's name, city and state?				
Would you like to receive your free copy of the Progress Report by mail or by email?				
☐ Mail ☐	Email			
Will you be givir	ng your first check today?	?		
Yes	No			
If no, what month will you begin support?				
I would like to add \$5□ \$10□ \$20□ \$ □ extra to my monthly support for the home office.				