

CCN North America

Community of the Cross of Nails

<http://www.crossofnails-na.org/>

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Telephone _____

Church Affiliation _____

My/our annual dues of \$ _____ for the year _____ are enclosed.

- Student \$15
- Individual \$50
- Sponsor \$100
- Patron \$500
- Sustainer Sponsor.....\$1,000

I/we pledge an additional \$ _____ to be paid (select one)

monthly quarterly annually.

Please contact me.

I have remembered the Community of the Cross of Nails, Inc. in my will.

New Mailing Address:

The Community of the Cross of Nails

Church of the Good Shepherd

P.O. Box 145

Lookout Mtn, TN 37350

“The Community of the Cross of Nails, Inc.” is a non-profit, religious corporation under the Laws of the State of Georgia and is tax exempt under Sec. 501(c)(3) of the ICR. Donors are, therefore, entitled to deduct their contributions under Sec. 170(a) of the ICR.