



Please print this form, complete it, then mail your gift to Sioux Falls Psychological Services.

I would like to give to: (please check)	
Where the Need is Greatest/General Fund	The Journey Program
The Marriage and Family Therapy Clinic	Specific Support Services for Ministers
Donation Amount \$	
First Name	Last Name
Street Address	
City	_
StateZip Code	<u> </u>
Phone Number	
E-mail	
I prefer to make my donation by:	
Check or Money Order (made out to "SFPS"	')
Credit Card (please enter information below)
Discover MasterCard Vi	sa
Credit Card Number	Exp. Date
Signature	
Please mail your gift to: Sioux Falls Psychological Services Attn: Clinical Director	

Thank you for your gift!

2109 S. Norton Avenue Sioux Falls, SD 57105

Sioux Falls Psychological Services is owned and operated by Sioux Falls Seminary. We are a non-profit 501(c)3 organization. Your gift is tax deductible.