



**We now accept
Credit Cards!**

Payment by credit card

Card # _____

Exp. Date: _____ Security #: _____

____ Date entered ____ Keyed in ____ Amount

YES! I want to help Pyoca's ministry!

I/we donate \$_____ towards Pyoca's future!

___ General Fund ___ Scholarship Fund

___ Designated gift (specify) _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Phone: _____

I agree to have Pyoca Camp, Conference & Retreat Center charge the above amount to my credit card and agree to the terms of payment.

Signed Date

886 East County Road 100
S
Brownstown, IN 47220
Phone: 866-251-2267
Fax: 800-391-5750
Email: Rich@pyoca.org