



FURAHA AFRICA RELIEF ASSOCIATION

CHILD SPONSORSHIP APPLICATION FORM

I would like to join the child sponsorship program of the Furaha Africa Relief Association.

As a sponsor my preference is to correspond with a child from one of the following countries:

Uganda ___ Congo ___ Sudan ___ no preference ___ (check one)

Gender: male ___ female ___ no preference ___ (check one)

Note: There may be some children in the program that no longer have a sponsor. FARA will recommend one of them to you. Or you can pick from the children listed on the FARA website. Indicate the selected Child No. ___

I understand that all my correspondence with the child will be through the FARA organization and the program's office in Uganda.

I am aware that the main focus of the FARA sponsorship program is on helping the child get an education by helping to pay their school fees. The program desires to support the child all the way up to and including college or university or through a trade school. The monthly donation that I make to the program also helps a child to purchase school uniforms and some medical and other relief needs.

I am aware that the FARA sponsorship program gives each child in the program annual gifts as budgeted by FARA which are included in the monthly/annual sponsorship fees. Annual support for one child is \$432 or \$36/month.

More information about this program is available on the website fararelief@gmail.com

Name: _____

Print

Address: City _____ Province _____ Postal Code _____

Email: _____ Phone: _____

STEWARDSHIP POLICY: "Funds designated for an approved and specified project, ministry or program will be used for that project, ministry or program. However, when any such project, ministry or program need has been adequately met, or where such project, ministry or program cannot reasonably be carried out in a timely manner, the donor agrees that such designated funds may be used as and where needed by **Furaha Africa Relief Association.**"

Office Information:

Date application received _____

Office contact: _____

Assigned Child's name: _____

Child # _____