

Baby Bottle Campaign

Church Participation Form

Please specify the date(s) your church would like to participate with WRMCSN in a Baby Bottle Campaign.

- Sanctity of Human Life** **Mother's Day** **Fall Campaign**
Sunday, Jan. 21st, 2024 Sunday, May 12th, 2024 Sunday, Sept. 15th, 2024

We will be participating on a date not listed above: _____

Please list the date you would like to conclude the campaign: _____

No, we will not be able to participate in a Baby Bottle Campaign, but we would like to bless WRMCSN by giving a donation of \$ _____ to go toward the success of the campaign.

We are requesting # _____ Bottles & # _____ Bulletin Inserts

We would also like the following materials to help us launch the Baby Bottle Campaign

- BBC graphics for announcement display.
- A video link to a patient testimonial video to play during announcements.
- Schedule a WRMCSN representative to be available with table display.
- Schedule a WRMCSN representative to be speak briefly (approx. 6 minutes including a patient testimony video) during our church service & table display.

Church Name: _____

Pastor's Name: _____ Email: _____

Church Liaison Name: _____ Email: _____



Please email completed forms to: events@savealifeclub.com