

# Baby Bottle Boomerang Fundraiser

Full name of Church: \_\_\_\_\_

Church Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Church Email: \_\_\_\_\_

Life Ambassador/Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Participation Dates (typically 3 weeks): \_\_\_\_\_ to \_\_\_\_\_

Number of bottles requested for your church: \_\_\_\_\_

Bulletin Inserts:  We will print inserts, please email insert to: \_\_\_\_\_

Please provide the following amount for us: \_\_\_\_\_

Speaker:  We would love a speaker on \_\_\_\_\_. They have \_\_\_\_\_ minutes.

Short Kick-off Video:  Yes, please email to \_\_\_\_\_

## How to get bottles to your church?

### Before Campaign

Please drop off bottles to our church on: \_\_\_\_\_

We will pick bottles up on: \_\_\_\_\_

### After Campaign

Please pick bottles up when campaign is over

We will drop bottles off on: \_\_\_\_\_

**Please mail form to address or respond by email.**

Muskegon Pregnancy Services  
Attn: Stacey Flores  
1775 Wells Ave.  
Muskegon, MI 49442  
[stacey@bestoptions.org](mailto:stacey@bestoptions.org)