

H*VMI's South Jersey Luncheon *Is On The Move*

Come and See!



Please join us.

God is doing so many amazing things in and through the H*VMI Ministry. **"COME and you will SEE!"** as Jesus said in **John 1:39**. It was His gracious invitation to His disciples so they would discover many things; but they needed to COME AND SEE!

Since its beginning, H*VMI's mission has been to create awareness and equip the local church to be able to minister to people who have special challenges in their lives. What better place, then, to invite people to COME so they can SEE what God is doing through H*VMI than—to a local church!

So, we asked, and, Easton Bible Church is permitting us to have our Annual South Jersey Luncheon at their facility this year.

This invitation is for YOU—and for ALL our dear ministry partners and friends from the entire South Jersey/Philadelphia area.

April 13, 2024

11:30 a.m. – 2:00 p.m.

(Doors open at 10:45 a.m.)



Easton Bible Church, 2407 Fostertown Road, Hainesport NJ

Program – Ministry Updates from our Executive Director and other H*VMI Missionary Staff, including progress on the H*VMI Property; Video Presentation of God at Work through H*VMI.

A delicious lunch will be provided. As always, the lunch is free, with an opportunity provided to make a donation to H*VMI as God leads and provides for you to do so.

Registration required by April 5, 2024 in one of the following ways.

Online at hvmi.org **Call** 717.859.4777 **Mail** the response form below to H*VMI
(be sure to complete your contact information)

Please complete information below, cut off and return in the enclosed envelope. We need your name(s) for registration and/or receipting purposes. ✂

H*VMI's 2024 South Jersey Luncheon & Fundraising Event

YES! I/We would like to attend H*VMI's 2024 South Jersey Luncheon.

Name(s) _____

Please use reverse side of form for any additional names for registration purposes

Unfortunately, I/we are unable to attend the H*VMI Luncheon but want to help the ministry work of H*VMI.

Enclosed is my one-time gift of \$ _____.

Recurring monthly gift of \$ _____.

Method of Giving

My check payable to H*VMI is enclosed.

Please bill my credit card: Visa MasterCard Discover American Express

▲ Credit Card No. _____

▲ Exp. Date (MM/YYYY) _____

▲ Signature _____

▲ Security Code _____

▲ Name (If paying by credit card, please print your name as shown on the card.) _____

▲ Street or PO Box _____

▲ City _____

▲ State _____

▲ Zip _____

▲ Phone _____

▲ Email _____

Special Needs

Gluten Free Meal Pureed Meal

Sign Language Interpreter

