

THE **COMPASS** CHURCH
EVENT DISCOUNT
APPLICATION

Provided through the Assistance Fund

ASSISTANCE INFORMATION

It is our desire that everyone is able to attend church-sponsored ministry events and activities without finances being an obstacle, which is why we offer financial assistance. We ask that you only request assistance if it would be difficult or not possible for you or your child to attend the event/activity if it were not for the financial assistance. If approved, you will receive a fifty percent discount of the ministry fee.

CONTACT INFORMATION

Applicant Name: _____
(First) (Middle) (Last)

Parent(s) Name (if applicable): _____

Email Address: _____ Phone Number: _____

Address: _____

REQUEST INFORMATION

What ministry event/activity is your request for? _____

What is the cost of the ministry event? _____

How long have you been attending The Compass Church? _____

Which campus do you attend? _____

If you are not a regular attender, who invited you? _____

I understand that The Compass Church wants everyone to be able to attend ministry events and activities, without finances being an obstacle. I understand that The Compass Church is solely funded by the households of The Compass Church, and that the funds set aside for financial assistance are part of the congregation's Assistance Fund contributions, given by the people of the church. My current financial situation is such that it would be difficult or not possible for my child to attend this event/activity if I did not receive financial assistance. By signing below, I acknowledge that the above statement is accurate as it pertains to my financial situation at this time.

Signature of Applicant Printed Name Date

Pastor or Director Printed Name Date

Senior Staff Printed Name Date