



HUMBLE AREA ASSISTANCE MINISTRIES
 P.O. Box 14051 • Humble, TX 77347
 1302 First Street • Humble, TX 77347
 281-446-3663 • Fax: 281-446-2601

2019 COVENANT CONGREGATION AGREEMENT

The Congregation of _____ pledges to support Humble Area Assistance Ministries as a covenant Congregation and unites with HAAM's effort to assist our neighbors in need.

Humble Area Assistance Ministries agrees to provide:

- A common ministry where different faiths may come together in mutual outreach to our neighbors in need.
- Opportunities at HAAM for members of the congregation or groups to become involved in direct assistance to their immediate community.
- Specific ways for the congregation members to center around a shared service ministry.
- The "one-stop service center" where the clergy may refer individuals who come to the congregation seeking assistance.

The Covenant congregation agrees to provide:

- Two covenant representatives to serve and attend quarterly meetings.
- A financial commitment to support the ministries of HAAM in the amount of \$1.00 per active adult member of the congregation (minimum \$100) per year. Our congregation pledge is \$_____ for fiscal year **January 1, 2019 to December 31, 2019.**
- Volunteers from the congregation in such areas as Assistance Programs; Resale Shops; Food Pantry; Adult Education; Work Force Development; Family Mentoring; Committees; Administration; Seasons of Sharing; Back to School.
- Groceries for the Food Pantry and Resalable goods for the Resale Shop.
- Periodic Food Drives and Special Offerings for HAAM.

(Please Print)

CONGREGATION'S ADDRESS: _____

Mailing Address (if different): _____

City: _____ State/Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Clergy: (List names of clergy serving your congregation.)

Pastor: _____ **Email:** _____

Associate Pastor: _____ **Email:** _____

Associate Pastor: _____ **Email:** _____

Associate Pastor: _____ **Email:** _____

Music Director: _____ **Email:** _____

Youth Minister: _____ **Email:** _____

Church Secretary: _____ **Email:** _____

Administrator: _____ **Email:** _____



Covenant Agreement Pledge Form

Fiscal Year: 2019

We, the congregation of _____ are pleased to commit the sum of \$_____ to support HAAM.

Our first gift:

is enclosed will be made: _____
Date

The remainder shall be made in the following manner:

Monthly Quarterly
 Semi-Annually Annually

Please send courtesy reminder:

Yes No

Authorized Signature Title Date

Additional Information

HAAM Covenant Representative: _____

Mailing Address: _____ City/State/Zip: _____

Phone: _____ Fax: _____ Email: _____

HAAM Covenant Representative: _____

Mailing Address: _____ City/State/Zip: _____

Phone: _____ Fax: _____ Email: _____

Annual Church Events (Mission Month, Carnivals, Outreach Events, Fairs)

