

1 Contact information

first and last name

street address, city, state, zip

email address phone number

2 My 40 Days for Life vigil location

3 Vigil hours

		3/5 W	3/6 R	3/7 F	3/8 S
		am / pm	am / pm	am / pm	am / pm
3/9 S	3/10 M	3/11 T	3/12 W	3/13 R	3/14 F
am / pm	am / pm	am / pm	am / pm	am / pm	am / pm
3/16 S	3/17 M	3/18 T	3/19 W	3/20 R	3/21 F
am / pm	am / pm	am / pm	am / pm	am / pm	am / pm
3/23 S	3/24 M	3/25 T	3/26 W	3/27 R	3/28 F
am / pm	am / pm	am / pm	am / pm	am / pm	am / pm
3/30 S	3/31 M	4/1 T	4/2 W	4/3 R	4/4 F
am / pm	am / pm	am / pm	am / pm	am / pm	am / pm
4/6 S	4/7 M	4/8 T	4/9 W	4/10 R	4/11 F
am / pm	am / pm	am / pm	am / pm	am / pm	am / pm
4/13 S					
am / pm					

4 Sign the 40 DAYS FOR LIFE pledge

During these 40 days, I pledge to stand united with people of faith — across the entire world — to pray, fast and publicly stand up for the sanctity of human life.

signature

After filling out this card, you will receive follow up information about 40 Days for Life. Your information will never be sold or shared, and you may unsubscribe from these updates at any time.

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