

# ISLAND CONNECTIONS GIVING CIRCLE PLEDGE FORM



Donor name(s)

\_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**By signing below, I/we are committing to an annual donation/pledge of a minimum of \$1,000 per year to Island Connections for a minimum of three years.**

Annual Amount: \_\_\_\_\_ Number of Years: \_\_\_\_\_

This may be used for any purpose within the mission of Island Connections, as determined by the Board of Directors.

## **PAYMENT OPTIONS (payment due in full by December 15 of each year of the commitment):**

I am fulfilling my annual pledge at this time.

I will fulfill my annual pledge at various times throughout the year.

I would like to receive a payment reminder.

Please charge my credit card for this year's pledge:

Number \_\_\_\_\_

Exp \_\_\_\_\_ CVV \_\_\_\_\_

I would like to make a gift of stock or securities.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Printed name(s) as you wish it to appear in donor recognition materials:

\_\_\_\_\_

\_\_\_\_\_

I would like my gift to be anonymous.

**Thank you for your commitment to Island Connections!**