

CAMPAIGN PLEDGE FORM



I/WE WISH TO MAKE A GIFT TO THE TRINITY HOUSE CAPITAL CAMPAIGN.

Full Name :

Date :

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D	M	M	Y	Y	Y	Y

Campaign Pledge : 1 Year 2 Years 3 Years Beginning Date:

Phone & Email : _____

DONATION INFORMATION

Company Name (if applicable) :

Total Gift Amount : Initial Payment :

Full Address :

Credit Card # : Exp Date CSV

For Donor Recognition, I understand my name/ company will be listed as written above.

I wish to remain Anonymous.

My gift is in Honor/Memory of:

Personal Gift Corporate Gift

Use the space below for any other relevant information, comments or requests:

More Information:

101 E. Market St. | Leesburg, VA 20176

(703) 737-3721 | trinityhousecafe.com

Trinity House Community Nonprofit EIN: 20-8218751

Signature

THANK YOU FOR YOUR PLEDGE!