

PLEDGE FORM

I/We are proud to support and sustain Lotusland Forever!

**DONOR INFORMATION (PLEASE PRINT OR TYPE)**

NAME: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE 1: \_\_\_\_\_ PHONE 2: \_\_\_\_\_

FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**PLEDGE INFORMATION**

I/We pledge a total of \$ \_\_\_\_\_ to be paid:  Now  Monthly  Quarterly  Yearly

Starting on: \_\_\_\_\_ and to be fulfilled by: \_\_\_\_\_

Signature \_\_\_\_\_

**PAYMENT INFORMATION**

I/We plan to make this contribution in the form of:  Cash  Check  Credit card  Other

NAME ON CREDIT CARD: \_\_\_\_\_ EXP. DATE \_\_\_\_\_

NUMBER: \_\_\_\_\_ SECURITY CODE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_

Gift will be matched by (company/family/foundation) \_\_\_\_\_

Form enclosed  Form will be forwarded

I wish my gift to be used for:

Capital Improvements  Endowment  Please call me to discuss: \_\_\_\_\_

My gift is associated with a naming opportunity.

**GIFT RECOGNITION AND ACKNOWLEDGMENT**

Please list the following name(s) on all recognition and acknowledgments:

\_\_\_\_\_  
\_\_\_\_\_

I/We wish to have our gift remain anonymous.

*All cash gifts of \$25,000 or greater will be recognized on the Campaign Donor Wall.*

*I understand this gift is made in accordance with Lotusland's Gift Acceptance Policies.*

*Gifts not designated to endowment will be applied to capital improvements.*

**Tax ID: 23-7082550**

