



Pledge Form: Bailey Band Boosters

Donor Information (please print or type)

Name	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

Pledge Information

I (we) pledge a total of \$_____ to be paid:

____ now ____ once in November and once in December

I (we) plan to make this contribution in the form of:

____ cash ____ check ____ money order ____ other.

Gift will be matched by _____ (company/family/foundation).

____ form enclosed ____ form will be forwarded

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

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____ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

Bailey Band Boosters
11900 Bailey Road
Cornelius, NC 28031