



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:

| |
|--|
| |
|--|

____ 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