Multi-Year Pledge Form Sample

**Thank you for your generous support of ABC organization.**

Please complete the pledge form below:

I/We pledge the following gifts to ABC organization:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Amount: Indicate $ Amount | To be Paid by: Indicate Payment Date | Reminder Method: Choose a Reminder Method |
| Initial Gift |  |  |  |
| Year 2 Gift |  |  |  |
| Year 3 Gift |  |  |  |

I prefer to pay by:  

# Donor Information

Name(s): 

Address: 

City:State:Zip Code: 

Phone:  Cell Phone: 

Email: 

Preferred Method of Communication: 

Anonymous Gift?: 

Please credit my gift in this way: 

Donor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for your support