

# Donation Pledge Form



## Olympic Neighbors

Creating home and community for people with developmental disabilities

### Donor Information (please print)

Name \_\_\_\_\_

Billing address \_\_\_\_\_

City, ST, Zip Code \_\_\_\_\_

Phone 1 | Phone 2 \_\_\_\_\_

Email \_\_\_\_\_

### Pledge Information

I pledge a total of \$ \_\_\_\_\_ to be paid:  now  monthly  yearly for \_\_\_\_\_ years

I plan to make this contribution in the form of:  cash  check  credit card  other.

Credit card type | Exp. date \_\_\_\_\_

Credit card number \_\_\_\_\_

Authorized signature \_\_\_\_\_

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 complete form and mail along with your check to the address listed. For more information or to make credit card donations over the phone call 706-296-4091. You will receive a tax deductible receipt in the mail

Olympic Neighbors  
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