



— PLEDGE FORM —

Contact Information (Required Fields)

CONTACT PERSON: _____
 TITLE: _____ COMPANY: _____
 ADDRESS: _____
 CITY, STATE & ZIP: _____
 HOME PHONE: _____ WORK PHONE: _____
 FAX: _____ E-MAIL: _____

By signing below, I agree to honor the terms of the pledge outlined on this form.

— PLEDGE INFORMATION —

CAMPAIGNS

- Facilities Fund \$ _____
- Endowment \$ _____
- Operational Reserve \$ _____
(in Memory of Jack Buck)

PROGRAMS

- Education \$ _____
- General Operating \$ _____
- Girls \$ _____
- Health & Wellness \$ _____
- Summer Day Camp \$ _____
- Sports \$ _____

SPECIAL EVENTS

- Anniversary Awards & Alumni Celebration \$ _____
- Coca-Cola Golf Tournament \$ _____
- Jack Buck Celebrity Night with the Stars \$ _____
- Maleness to Manhood \$ _____
- Safety Weekend for Kids \$ _____
- Say Amen Banquet \$ _____
- Sheer Elegance \$ _____
- The Sky is the Limit \$ _____

TOTAL PLEDGE

\$ _____

- Check Enclosed (Mail along with this form to the attention of the PR & Special Events Department at the address below.)
- Please bill the above total to my credit card.
 - Visa MasterCard No. _____ Expiration Date: _____
- Cardholder Name _____
- Please keep my contribution anonymous. Acknowledge Donation As: _____
- I prefer that my contact information not be shared with parties outside this organization.

PRIVACY POLICY

The Mathews-Dickey Boys' & Girls' Club is a non-profit, 501 (c)3 organization and contributions are tax-deductible. Information collected via this document is utilized for the express purposes of Mathews-Dickey and will not be shared any other entity without the consent of the volunteer/member/donor. The Club maintains Internet firewalls on its servers to protect financial and other data. The make corrections to your contact information, please call Barbara Washington at (314) 382-5952, ext. 234.