



Pledge/Gift Agreement

Donor Information

Donor/Company Name: _____

Corporate Gift Contact Name: _____

Address: _____

City/State/Zip: _____ E-mail: _____

Phone Number: _____ Office Cell Home Preferred Method of Contact: _____

Gift/Pledge Information

I pledge a total of \$ _____ to Coulee Christian School over 1 2 3 4 5 years beginning ___/___ (mo/year)

	202__	202__	202__	202__	202__	5 Year Total
Giving Amount	\$	\$	\$	\$	\$	\$

One-time designated gift: _____

Special Notes/Designation:

Contribution Method

Reminder Request for Pledge: Annually Semi-annually Quarterly beginning Mo/Year _____

Form of Contribution: Cash/check EFT Bank Draft: School will contact you for more details

Credit Card: Clover Website

Stock Name and # of shares: _____

Gift will be Matched by: _____

Acknowledgement

Name as you want it to appear in formal publication: _____

I am willing to have my name published as a donor to Coulee Christian School: YES NO (Remain an anonymous donor)

Signature: _____ Date: _____

Administrator Review: _____ Finance Review: _____