



BOYS & GIRLS CLUBS
OF GREATER WASHINGTON

**Boys & Girls Clubs of Greater Washington
Pledge Form**

Name: _____

Company: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

I wish to make the following commitment:

Please accept my pledge to support Boys & Girls Clubs of Greater Washington.

Total Pledge Amount: \$ _____

Initial Payment Provided with this Form: \$ _____

Payment Period (years): 1 2 3 *(Please indicate.)*

Payment Schedule for Balance: _____ Annual _____ Quarterly _____ Monthly _____ Other

I understand that I will receive pledge reminders prior to the dates indicated above.

Please accept my one-time gift to support Boys & Girls Clubs of Greater Washington.

Amount: \$ _____

Payment Method: check credit card stock transfer wire transfer *(Please indicate.)*

Payment Options and Information

- Checks should be made payable to Boys & Girls Clubs of Greater Washington.
- Please bill my: _____ Visa _____ MasterCard _____ American Express

Account Number: _____ Expiration Date: _____

Signature: _____

- I plan to make installments on my pledge via a family foundation, donor advised or directed fund, or other charitable gift fund. The name of the fund is _____

*Boys & Girls Clubs of Greater Washington is a charitable organization and all gifts are tax deductible to the fullest extent of the law.
Please see your tax advisor with specific tax questions.*