

Parents' Annual Fund Pledge Card

- \$1,000 Pledge
- \$ 500 Pledge
- \$ 250 Pledge
- \$ 125 Pledge
- Other Amount \$ _____
- Unable to Pledge at this time
- I/my spouse work(s) for a matching gift company and I have enclosed the form.

Check is enclosed

Bill me in: _____
Oct. ,Dec. , Feb. and Apr.

Bill me in: _____
Dec. and Apr.

Bill me in: _____
Apr.

Parent Name _____

Student Name/Grade _____

Address _____

Phone _____

E-Mail _____

Mastercard Visa

Credit Card # _____ Exp. Date _____

____/____/____ 3-Digit PIN from back of card

Signature _____

All Pledge Payments must be paid in full by April 30,2012



Thank you for your generous support of ECHS!