PORTLAND OVATIONS

Pledge Form: Annual Membership + Bridge Campaign

Donor Information (please print or type)

Last Name:_____ First Name:_____ MI:_____

Address:_____

City:_____ State:_____ Zip:_____

Home Phone:_____ Business Phone:_____ Cell Phone:_____

Email:_____

Pledge Information: Annual Membership Renewal and Additional Gift to the Bridge Campaign

I (we) pledge a total of $_____ **for renewal of our Annual Membership Gift at the following level:** _____

I (we) pledge a total of $_____ **for our additional gift to the Bridge Campaign**

Enclosed please find a total toward both gifts of $_____ with a remaining pledge balance of $_____

I (we) wish to pay this pledge over _____ years.

I (we) plan to make my (our) contributions in the form of:

cash check charge stock other:

For stock transfers please contact Mary Campbell at 207.773.3150 or mcampbell@portlandovations.org

Please charge my credit card: ☐Visa ☐MasterCard ☐Discover

Credit card number:_____ Expiration Date:_____

Authorized Credit Card Signature:_____

Please bill me beginning on_____ and thereafter ☐monthly ☐quarterly ☐yearly ☐other:_____

My gift will be matched by_____ company/foundation

☐ matching gift form enclosed ☐matching gift form will be forwarded to Portland Ovations

Donor Recognition (Donors will be recognized unless an anonymous gift is requested)

Please use the following name(s) in all acknowledgments:_____

☐ I (we) wish to remain anonymous

Please make checks and corporate matches payable to Portland Ovations.
Donations are tax-deductible to the extent allowed by law.

I hereby commit to the pledge and authorize the payments as indicated above:

_____ _____ _____

Print Name **Signature** **Date**

Please return your pledge to: Mary Campbell, mcampbell@portlandovations.org