

## **SCHEELS Tiger Performance Center Gift Form**

I support the new SCHEELS Tiger Performance Center and wish to make the following gift (payable to Cedar Falls Schools Foundation): □ One-time gift in the amount of \$ \_\_\_\_\_ □ Pledge (total amount): \$ Frequency of payment (kindly requesting that all payments are made by December 31, 2026): ☐ Annually ☐ Semi-Annually ☐ Quarterly ☐ Monthly Pledge Payment Amount: \$ \_\_\_\_\_ **Donor Information:** Name: \_\_\_\_\_ Date: \_\_\_\_\_ Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_\_ Email: \_\_\_\_\_ **Gift Recognition** (please check one): Contributions of \$1,000 or more will be recognized on the donor wall in one of the following ways: ☐ I would like my recognition to be listed on the donor wall as: \_\_\_\_\_\_ ☐ I would like my gift to remain anonymous. **OPTIONAL SELECTIONS: Gift Designation** (please check up to one): ☐ I would like my gift to be made in honor of Coach Doyle ☐ I would like my gift to be made in honor of Coach Mitchell ☐ I would like my gift to be made in honor of Coach Slykhuis Desired Naming Opportunity (subject to availability): My gift will be matched by: \_\_\_\_\_ (Company Name) □ Matching form enclosed

Please return this pledge form via email to <a href="mailto:monica.boyer@cfschools.org">monica.boyer@cfschools.org</a> or by mail to: Cedar Falls Schools Foundation 602 Main Street Cedar Falls, IA 50613

