



Pledge Form

I support an indoor swimming pool facility at the new Cedar Falls High School and wish to make the following gift (payable to Cedar Falls Schools Foundation):

One-time gift in the amount of \$ _____

Three-year pledge in the total amount of \$ _____

Five-year pledge in the total amount of \$ _____

Other \$ _____

If making a multi-year pledge:

Total Pledge: \$ _____ Pledge Payment Amount: \$ _____

Frequency of payment: Annually Semi-Annually Quarterly Monthly

Donor Information:

Name: _____ Date: _____

Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

What is your connection to swimming?

Black Hawk Area Swim Team (BLAST) Cedar Falls High School Swimming and Diving

Other _____

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 Marcussen.

I would like my gift to be made in honor of BLAST friends and family.

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 foundation@cfschools.org or by mail to:

Cedar Falls Schools Foundation

602 Main Street

Cedar Falls, IA 50613

Cedar Falls Schools Foundation is a 501(c)(3) tax exempt organization and gifts may be deductible by law.

THANK YOU FOR YOUR SUPPORT!

Administrative only: Date _____ Initial _____ Match offering _____