

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 \$		
Two-year pledge in the total amount of \$		
Three-year pledge in the total amount of \$		
If making a multi-year pledge:		
Total Pledge: \$ Pledge Payment Amoun	nt: \$	
Frequency of payment: Annually Semi-Annually	y Quarterly Monthly	
Donor Information:		
Name:	Date:	
Address: City, St	tate, Zip:	
Phone: Email:		
What is your connection to swimming? Black Hawk Area Swim Team (BLAST) Ceda Other	•	ng
Gift Recognition (please check one): Contributions of \$1,000 or more will be recognized c	on the donor wall in one of the followi	ng ways:
I would like my recognition to be listed on the dor I would like my gift to remain anonymous.	nor wall as:	
OPTIONAL SELECTIONS: Gift Designation (please check up to one): I would like my gift to be made in honor of Coa I would like my gift to be made in honor of BLA		
Desired Naming Opportunity (subject to availabi	ility):	
My gift will be matched by:	(Company Name)	Matching form enclosed
Please return this pledge form via email to <u>foundation</u> Cedar Falls Schools Foundation 602 Main Street Cedar Falls, IA 50613	on@cfschools.org or by mail to:	



Cedar Falls Schools Foundation is a 501(c)(3) tax exempt organization and gifts may be deductible by law. THANK YOU FOR YOUR SUPPORT!