

PLEDGE FORM



3 Great Pond Road
North Andover MA 01845
978.687.7948
www.northparish.org

“TOGETHER UNDER ONE ROOF” CAPITAL CAMPAIGN PLEDGE FORM

In consideration of the gifts and pledges of others I/we pledge the total amount of \$ _____ to the campaign. This gift/pledge to the campaign will be fulfilled as follows:

DURATION: This pledge will be payable over: 1 Year 2 Years 3 Years

FREQUENCY: These pledge payments will be made:

Monthly Quarterly Semi-Annually Annually

Pledge payment schedule starting ____/____/____

TOTALS: The expected annual totals paid will be:

\$ _____ calendar year 2013 \$ _____ calendar year 2014 \$ _____ calendar year 2015

METHOD OF PAYMENT: Please check all that may apply to payments toward this pledge:

Personal Check/Cash Credit Card Securities Electronic Bank Transfer

CONTACT INFORMATION:

Name _____

Address: _____

Email: _____

Phone: _____

___ Please remind me/us about my/our pledge via: mail email phone

___ I/we request that this gift be considered anonymous

___ I/we would like my/our name(s) to be listed as follows:

Signature _____ Date _____

Signature _____ Date _____

Please make checks payable to North Parish with “Together Under One Roof” in the memo field.