

YES, I/WE WANT TO SUPPORT FRASSATI CATHOLIC

To continue building Frassati Catholic High School, we pledge/make this gift to Phase 1B of the Campaign:

Total Gift Amount \$ _____

Initial Payment \$ _____

Balance \$ _____

The remaining balance will be payable in installments of _____ over the next _____ years (no longer than five [5] years)* beginning _____, 20____, on the following schedule :

- Annually Semiannually Quarterly Monthly Other (check one)

***Note: All pledges of \$5000 or less are payable over a three-year period.**

- Please find my check enclosed (*made payable to Frassati Catholic High School*)
 Please automatically deduct from my checking/savings account *OR* from my credit/debit card:


Checking Savings Bank Name: _____

Name on Acct: _____

Account Number: _____

Bank Routing #: _____

Bank City/State: _____



Visa MasterCard
 Amex Discover

Cardholder Name: _____

Account Number: _____

Exp. Date: _____

Signature for authorization: _____

- Gifts of Stock: Contact the Frassati Catholic High School Office for stock gift form.
 Matching Gifts: If you are employed by a matching gift company, please acquire the necessary forms.

Donor Name: _____

Address: _____

City/State/Zip: _____

Email: _____ Phone: _____

Cell: _____ Parish: _____

Company: _____

Signature: _____ Date: _____

- Please list my (our) name(s) in all Campaign reports as follows:

- I wish to remain anonymous

Gifts are tax deductible to the fullest extent allowed by law.
 Unless otherwise noted above by donor, funds from this pledge will be used at the sole discretion of the Frassati Catholic High School Board of Trustees.

Thank you for your generous support.