

## Champions for Education Virtual Fundraiser

I would like to become a member of the Champions for Children Society:
<ul> <li>□ Innovation Impact: \$1,000 per year for 5 years</li> <li>□ Inspiration Impact: \$5,000 per year for 5 years</li> <li>□ Transformation Impact: \$10,000 per year for 5 years</li> </ul>
I would like to contribute in other ways:
<ul><li>□ Contribute \$ for years.</li><li>□ Please contact me. I have other thoughts to share.</li></ul>
Payment:
<ul> <li>□ My check is enclosed, made payable to: Brevard Schools Foundation</li> <li>□ Please charge my Visa/MC/Amex # Exp CSC</li> <li>□ Please contact me about paying my pledge with stock.</li> <li>□ My company will match my gift.</li> </ul> We will bill you annually for your pledge. For alternative payment arrangements, please contact
Pamela Gunthorpe, 321-633-1000, ext 11474.
Signature:
NameDate
CityStateZip
Day Phone () Evening Phone ()
Email:
Company/Organization



## **Second Year Pledges**

Thank you for your prior pledge of support.
Please tell us how you would like to support Brevard Schools Foundation today.

I would like to:
1. Addmore years to my previous multiple-year pledge.
2. Increase my financial commitment to \$ for years.
3. Pay off my existing pledge in full and increase to \$ for years.
4. Pay my annual pledged amount today.
Please complete payment and contact information on the other side of this document.
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