



THE CAMPAIGN  
FOR  
ASSUMPTION-ST. BRIDGET SCHOOL

*Celebrating Our Legacy. Building Our Future*

**PLEDGE COMMITMENT FORM**

**DONOR INFORMATION** (please type or print)

Name (First): \_\_\_\_\_ (Last): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PLEDGE INFORMATION**

It is my/our intention to contribute to *The Campaign for Assumption-St. Bridget School* the following gift (please mark one):

Please Mark (X) Gift Level	Total Gift Amount	Payable Over:	Annual Commitment	Gifts We Need at This Level (Will You Consider One of These Levels?)
	\$100,000	3 years	\$33,333	1
	\$50,000	3 years	\$16,667	4
	\$25,000	3 years	\$8,333	8
	\$15,000	3 years	\$5,000	12
	\$10,000	3 years	\$3,333	16
	\$5,000	3 years	\$1,667	20
	Other: \$ _____	3 years	\$ _____	Many

**\*Four year pledges are accepted if payment is received by the end of 2019\***

**All pledges must be paid in full by 2021**

Payment frequency: Monthly \_\_\_ Quarterly \_\_\_ Semi-annual \_\_\_ Annual \_\_\_ to begin on (date): \_\_\_\_\_

- My/Our initial payment of \$ \_\_\_\_\_ is enclosed. (Checks payable to: **ASB School**)
- Check (Please make checks payable to: ASB School)
- Credit Card/Online [www.asbschool.org](http://www.asbschool.org)
- Stock Transfer (Download form online at [www.asbschool.org](http://www.asbschool.org))
- My/Our employer will match the gift.

**GIFT ACKNOWLEDGMENT**

Please use the following name(s) in all acknowledgements: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail this pledge form and any payment to:**

Assumption-St. Bridget School  
Development Office  
6220 32nd Ave NE  
Seattle, WA 98115