



Neck Of the Woods
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PLEDGE FORM

In support of Neck Of the Woods: Empowering Our Future

DONOR INFORMATION:

Name: _____

Mailing Address: _____

City, State ZIP: _____

Phone: _____

Email: _____

Signature: _____

I/WE PLEDGE A GIFT OF: \$ _____

PAYMENT SCHEDULE:

I/we will pay my/our pledge according to the following schedule:

\$ _____ by Dec 31, 2023

\$ _____ by Dec 31, 2024

\$ _____ by Dec 31, 2025

GIFT RECOGNITION INFORMATION:

- I/We wish to be listed in any public listing of contributions as "Anonymous"
- Please recognize my/our gift _____ in memory of or _____ in honor of:
- I/We wish to be acknowledged for this gift as (name):

GIFT INFORMATION:

- Please send me reminders prior to the dates above by:
 - phone email letter
- A check is enclosed payable to Neck Of the Woods
- Please contact me about paying my pledge with a gift of appreciated securities or another asset Pay online at neckofthewoodsvt.com
- Please charge the amount stated above to this card:

Card number: _____

Expiration date: ____ / ____ Security Code: _____ Card Type: MC / VISA / DISC