



ANN ARBOR PUBLIC SCHOOLS

Educational Foundation

FUNDING EXCELLENCE & INNOVATION

PLEDGE AGREEMENT

SECTION A: DONOR INFORMATION

*Name(s): _____ *EmailAddress: _____

*Address: _____

*City: _____ *St: _____ *Zip : _____

*Phone: Home: _____ Phone: Cell: _____

SECTION B: BUSINESS INFORMATION

Name: _____ Title: _____

Address: _____

City: _____ St: _____ Zip : _____

Phone: _____ Fax: _____

SECTION C: PLEDGE INFORMATION

Please allocate my pledge of \$ _____ to:

Math and Science _____ Early Childhood Education _____

Arts and Humanities _____ Career and College Readiness _____

Where Most Needed _____ Great Idea Grants _____

- Give primary credit to: ___me ___me and my spouse ___business
- My gift will be matched by ___my employer ___my spouse's employer
(Please obtain form from company and submit to AAPSE Educational Foundation for completion.)
- I would like to remain Anonymous

SECTION D: PAYMENT INFORMATION

The payment schedule I prefer is:

- Annual payments of \$ _____ to begin _____
- Quarterly or monthly (circle one) payments of \$ _____ to begin _____
- Other: _____

Please send my pledge reminder via: E-mail US Mail No reminder necessary

My preferred method of payment is:

- Check made payable to AAPSEF
- Charge my ___VISA ___MasterCard ___Discover

Name on Card: _____

Number: _____ Exp. Date: _____ CSC Code: _____

*Above Fields Required for charge

SECTION E: SIGNATURE

Signature: _____ Date: _____

Printed Name: _____