



PLEDGE FORM

FOR RESIDENTIAL DONORS

Subscribe to our
Monthly E-Newsletter!



WHAT IS YOUR INFORMATION?

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. ☐ Other: Email:

First Name: Last Name: Suffix:

Spouse: Home Address:
City, State, Zip Code

Phone: ☐ Cell ☐ Home ☐ Work

Your Employer: Spouse's Employer:

WOULD YOU LIKE TO JOIN A LEADERSHIP GIVING SOCIETY?

Select the level of your annual giving (yours only **or** combined with your spouse):

<input type="checkbox"/> Alexis de Tocqueville Society Annual Gift of \$10,000 or more	{	<input type="checkbox"/> Admiral \$5,000-\$9,999	<input type="checkbox"/> Commodore \$2,500-\$4,999
<input type="checkbox"/> Bayou Society Annual Gift of \$500-\$999		<input type="checkbox"/> Captain \$1,500-\$2,499	<input type="checkbox"/> Commander \$1,000-\$1,499
<input type="checkbox"/> Steamboat Society Annual Gift of \$1,000 or more			

HOW WOULD YOU LIKE TO BE RECOGNIZED?

Recognition for Annual Gifts of \$500 or greater:

☐ Combine my gift with my spouse. ☐ Do NOT combine my gift with my spouse. ☐ I wish to remain anonymous.

Publish My Name As (include spouse's name if desired):

WHAT IS YOUR PLEDGE TO OUR COMMUNITY?

OPTION 1 - DIRECT BILL

Select an option below. Note: \$500 annual minimum for direct billing.

<input type="checkbox"/> Monthly (12) Start Date: 1/31	<input type="checkbox"/> Quarterly (4) Start Date: 3/31
<input type="checkbox"/> Semi-Annual (2) Start Date: 5/31	<input type="checkbox"/> Annual (1) Bill Date: 7/31 Amount: <input type="text"/>
<input type="checkbox"/> Stock	<div><div>Stock Name: <input type="text"/></div><div>Approx. Amount: <input type="text"/></div><div>Estimated Transfer Date: <input type="text"/></div><div>Transferring Agent: <input type="text"/></div></div>

Direct Bill Donors Receive Statements.

OPTION 2 - DONATE NOW

Select an option below.

☐ **Cash (enclosed):**

☐ **Check (enclosed):**

OPTION 3 - CREDIT CARD BILLING

TEXT **UNITEDWAYNELA** TO **91999**

\$25 Minimum

<input type="checkbox"/> One Time Credit Card:	Amount: <input type="text"/>
<input type="checkbox"/> Recurring Credit Card:	<div><input type="checkbox"/> Monthly (12) charge</div> <div><input type="checkbox"/> Quarterly (4) charge</div>
Amount: <input type="text"/>	

THANK YOU FOR YOUR SUPPORT!

MY TOTAL ANNUAL GIFT IS: To Authorize Your Pledge, Please **Sign:**

Signature

Date