



PLEDGE CARD

Name: _____
 Address: _____
 City/State/Zip: _____
 Phone (home): _____ (work): _____
 email address: _____

In support of St. Joseph Parish and School, I/We hereby pledge and agree to give the sum of \$ _____ to the **RAISE THE ROOF CAMPAIGN.**

Payments will take the following form:

- cash/check VISA/MASTERCARD card# _____
 automatic withdrawal from checking (*Please include voided check of account to be debited from*)

I/We authorize St. Joseph to initiate debit entries from my (our) bank account in the amount of \$ _____ for the **RAISE THE ROOF CAMPAIGN.**

Please send me more information regarding this service.

- Securities
 My employer offers a matching gifts program.

Name of Company: _____

Gifts can be paid over a 3 - year period

Gift enclosed: \$ _____

Please make checks payable to: **ST. JOSEPH** • 529 Madison Street • Lockport, IL 60441 • (815) 838-0415

Balance payable as follows, over a period of:

- Annually Semi annually Quarterly Monthly Other

Date contributions will begin: _____

I would like to designate my gift:

In honor of _____

In memory of _____

This gift is anonymous, and should not be publically acknowledged.
 May we include your name(s) for recognition purposes? yes no

 Please print name(s) as you would like them to appear

Signature: _____ Date: _____

Further inquiries regarding the **RAISE THE ROOF CAMPAIGN** are to be directed to:

Michelle Ray, Director of Development (815) 838-0415

