



# Pledge Form

## City of Lenoir Parks & Recreation

*The mission of Lenoir Parks and Recreation Department is to enhance the quality of life while providing innovative, enjoyable, and safe recreational opportunities to all citizens. Our goal is to provide excellent customer service through our staff, facilities, and parks.*

### Donor Information (please print or type)

Name	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

### Pledge Information

I (we) pledge a total of \$\_\_\_\_\_ to be paid:  
 \_\_\_ now \_\_\_ monthly \_\_\_ quarterly \_\_\_ yearly.

I (we) plan to make this contribution in the form of:  
 \_\_\_ cash \_\_\_ check \_\_\_ credit card \_\_\_ other.

Credit card type	
Credit card number	
Expiration date	
Authorized signature	

Gift will be matched by \_\_\_\_\_ (company/family/foundation).  
 \_\_\_ form enclosed \_\_\_ form will be forwarded

### Acknowledgement Information

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

--

\_\_\_ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

Lenoir Parks & Recreation  
 P.O. Box 958  
 Lenoir, N.C. 28645.