

## I would like to become a member of the Hope Society:

- Gift of Hope: \$1,000 a year for 3 years**  
Provide 2 meals a day and snacks for a student for the entire school year
- Bill me \$84 each month.
  - Bill me \$250 each quarter.
  - Bill me \$1,000 each year.
  - I am donating \$250 today, so it will be matched. Start billing me \$84 a month on August 1, 2010.
- Gift of Home: \$10,000 a year for 3 years**  
Help a family create a safe home for their children
- Gift of Education: \$25,000 a year for 3 years**  
Sponsor a classroom including specialized tutoring and therapeutic education

———— or ————

## I would like to support First Place at a different level:

I am paying in full today.

\$2,500  \$1,000  \$500  \$250  \$150  \$\_\_\_\_\_

I would like to pledge:

Annually \$\_\_\_\_\_ for \_\_\_\_\_ years.

Monthly \$\_\_\_\_\_ for \_\_\_\_\_ years.

## First Place Donor Information

Virtual Table

Name \_\_\_\_\_

Business \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address \_\_\_\_\_

Phone ( ) \_\_\_\_\_  Cell  Home  Work

Please list my gift as anonymous.

## Current Pledge Donors

Please make the changes below to my previous pledge of support to **First Place**.

Apply today's gift to my current pledge.

Increase or extend my pledge to \_\_\_\_\_

## Matches

My company will match my gift.

Company Name: \_\_\_\_\_

## Payment:

My check is enclosed, made payable to **First Place**

I am enclosing cash.

My credit card information:

Check One:  Visa  Mastercard  American Express

Name on Credit Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_