



MIA Rays Squadron Pledge Form

Name (s): _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone (office): _____ (home): _____ (cell): _____

E-mail: _____

PLEDGE INFORMATION

YES, I/We want to contribute to MIA Rays Squadron and direct the gift towards the _____ Fund.

I/We have enclosed a gift of \$ _____.

I/We wish to pledge this amount \$ _____.

to be paid over 1 2 3 year (s) monthly yearly

GIFT METHOD

I/We plan to make the contribution in the form of:

Cash Check Credit Card Stock Property Other

For stock transfers or property donation please contact

Hilary F. Noyes at hnoyes@marcoislandacademy.org, or (239) 393-5133

Please charge my gift to **VISA, MASTERCARD, DISCOVER** or **AMEX**

Card No. _____

Exp. Date _____ Sec. Code _____

Name on Card _____

Contributor Signature _____ Date _____

Contributor Signature _____ Date _____

I/We would like our gift to be recognized through a Naming Opportunity of: _____

Make gift (s) payable to: MIA Rays Squadron ~ Donor Relations Office
2255 San Marco Road, Marco Island, FL 34145

Contributions to MIA Rays Squadron, a 501(c) (3) nonprofit organization, are tax deductible to the fullest extent of the law.