



Pledge Form

Donor Information (please print or type)

Name _____

Billing address _____

City, State, Zip Code _____

Phone 1 | Phone 2 _____

Fax | Email _____

Pledge Information

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

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

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 check payable to:

Country Living Learning Center
P.O. Box 885
Hugo, CO 80821

Please note that pledges to donate will only be due upon the successful receipt of sufficient grant funding to begin building the child care center.