



**ROOSEVELT FOR GENERATIONS CAMPAIGN
PLEDGE COMMITMENT FORM**

I/we pledge and agree to donate \$ _____ to support the **ROOSEVELT FOR GENERATIONS Campaign**

Enclosed is donation paid in full

- Check (payable to Roosevelt High School Foundation)
- Credit Card
 - American Express
 - Discover
 - Mastercard
 - Visa

Account # _____ - _____ - _____ Exp Date ____/____

Security Code _____

Name as appears on card (please print) _____

I/we would like to make payments over _____ years (up to three) beginning: _____, 20____
Payments to be made: Quarterly Semi-Annually Annually Other _____

Please send reminders: Quarterly Semi-Annually Annually Other _____

For recognition purposes list my/our name(s) as _____

I/we would like to remain anonymous

If Roosevelt graduate, please list year of graduation: _____

This gift is made in honor/memory (circle one) of _____

Please notify: _____

Address: _____ City/State/Zip: _____

Please complete ALL of the following information:

Name (please print) _____

Address: _____ City/State/Zip: _____

Phone _____ Email _____

Signature: _____ Date: _____

*All contributions are tax deductible as allowed by law
All pledge forms must be signed and dated to be valid for auditing purposes*

Thank You for your donation to the Roosevelt High School Foundation
trhsfoundationdm@gmail.com

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