

# Warrior Pledge: PLEDGE FORM

FULL PLEDGE FORM

Last Name	First Name		
Team Name (if applicable)			
Address			
City	State Zip		
	- -		
Phone	Home Phone    Work Phone    CELL Phone		
Email address	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 5px;">                 Total Number Of Checks                  # <span style="border: 1px solid black; display: inline-block; width: 20px; height: 15px;"></span> </td> <td style="width:50%; padding: 5px;">                 Total Pledge Dollars Enclosed                  \$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span> </td> </tr> </table>	Total Number Of Checks # <span style="border: 1px solid black; display: inline-block; width: 20px; height: 15px;"></span>	Total Pledge Dollars Enclosed \$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px;"></span>
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Fill out the form, include checks and mail it to Memorial Scholarships, Inc.; 127 Faith Way, Jupiter Florida 33458. Please make sure your Matching Gift Forms are enclosed. Please use a new form every time you submit pledge donations. Thank you.

CONTRIBUTOR	ADDRESS	PLEDGE AMOUNT	MATCHING GIFT
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
Total Pledged			

## SAMPLE CHECK

Rachal Jones  
67 Anywhere St.  
Jupiter, FL 33458

Date 9/09/09    5002

**Donor Name & Address**

Pay to the order of Memorial Scholarships, Inc. \$ 25.00

Twenty Five and no cents dollars

Warrior Bank  
52 Scholarship St.  
Tequesta, FL 33469

Rachel Jones

Memo Heather Smith

To ensure proper credit for all pledges, please, ask that all checks be made out as shown below.



**Pledge Registrant Name**

Mailing address: 127 Faith Way, Jupiter Florida 33458    561-758-156    www.johnyncyscholarship.org