



Pledge-O-Rama 2017

Pledge Form

Date _____ Time _____

Donor Info

First Name _____ Last Name _____

Company _____

Address _____ Phone _____

City _____ Province _____ Postal Code _____

Email _____ Receive UMFM Info Via Email? Y N

Shows To Support: _____

Donation Info

Amount of Pledge \$

Payment Method Cash Cheque Debit Visa Mastercard PayPal

Credit Card # _____ Expiry _____

Payment Terms

Term Payment Plan? # of payments _____ Frequency _____

Payment Amount _____ Start Date _____

Incentive Info

Incentive Pkg? Tax Receipt?

Show Incentives Received _____

Incentive Received? Y N

Office Use:

Pledge Info Has Been Entered On: umfm.com filemaker filed in binder

UMFM Volunteer

UMFM Supervisor