

PLEDGE FORM

Thank you for your generosity and your commitment to supporting Special Olympics Pennsylvania. Please complete this form to officially designate your financial contribution to the Inclusion Revolution Campaign of Special Olympics Pennsylvania.

NAME _____

ADDRESS _____

CITY / STATE / ZIP _____

PHONE (MOBILE) _____ **PHONE (WORK)** _____

EMAIL _____

In support of the Inclusion Revolution Campaign for Special Olympics Pennsylvania, I/we pledge my/our gift in the amount of:

\$ _____.

To be paid in installments of \$ _____ over a period of _____ years on _____ (date) or as follows: _____

Please acknowledge my/our gift as: _____

Check this box if you wish to remain anonymous:

SIGNED _____ **DATE** _____

Please return the completed form to:

Special Olympics Pennsylvania // Attn: Inclusion Revolution Campaign

2570 Blvd of the Generals, Suite 124 // Norristown, PA 19403

[Checks can be made payable to: Special Olympics Pennsylvania / Inclusion Revolution Campaign]

For questions about gifts of securities, from donor advised funds, or IRA rollover funds, contact: (610) 630-9450 x229.

SPECIAL CONSIDERATIONS OR NOTES _____

The official registration and financial information of Special Olympics Pennsylvania may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania, 1 (800) 732-0999. Registration does not imply endorsement.

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