



Growing Our Faith

Gift Agreement Form

Donor Information

Name _____

Company (if donation is not personal) _____

Address _____

City, State, Zip _____

Home phone _____ Business phone _____

Cell phone _____ Email _____

Gift/Pledge Information

I/we pledge a total of \$ _____ to the campaign to be fulfilled over _____ years.

I would like to fulfill this pledge: annually semi-annually quarterly

Installments will begin on _____ Date and end on _____ Date .

At any time in the future, frequency of gift fulfillment may be adjusted by the donor with notice given to the organization.

This donation will be made in the form of check credit card stock

We will contact you for further information if you choose credit card or stock.

Please accept the enclosed payment of \$ _____ toward this commitment.

I/we work for a company that matches gifts _____
Name of company

Donor Recognition

Please use the following name(s) in all acknowledgements:

 I/we wish to remain anonymous.

Donor Signature(s)

Your signature & date are required to comply with recommended accounting procedures.

Signature _____ Date _____

Thank you for your generosity

Please mail your completed commitment form to:

Fr. Jim Walsh, St. Pius X Church – 23 Crumitie Road, Loudonville, NY 12211

Questions? (518) 462-1336