



2022 - 2023
ANNUAL FUND
PLEDGE CARD

Please return this pledge card in the envelope included

Campus Affiliation ES IN SW

Name _____

- Alumni Parent Alumni Parent
 Friend Grandparent Faculty/Staff

Address _____

City/State/Zip _____

Phone _____

Email _____

My Gift \$ \$10,000 \$5,000 \$2,500 \$1,000
 \$500 \$250 \$100
 Other _____

My pledge will be paid: Annually Quarterly Monthly
 Other _____ Email my reminder to me

PAYMENT

- Check included Contact me about a bank draft
 Visa MasterCard American Express Discover

Card Number _____ Exp. Date _____

Name on card _____

Signature _____

Checks made payable to: Christian Academy Foundation
 In memory of In honor of

- My employer matches gifts (*Please include your matching gift form*)
 I have included Christian Academy in my will

Please remember Christian Academy in your estate planning. Call the development office at 502.743.4585 to discuss.

THANK YOU

