



Community Fund Pledge Form

.....
YES, I/WE WISH TO HELP STRENGTHEN & SUSTAIN THREE CEDARS WALDORF SCHOOL!

\$ _____

☐ Check enclosed, payable to Three Cedars Waldorf School

☐ Please charge my/our: ☐ Visa ☐ Mastercard

☐ Pledge, to be paid by July 31, 2016

ACCOUNT NUMBER

EXP DATE

AUTHORIZED SIGNATURE

<input type="checkbox"/> Joy	\$ 10,000+
<input type="checkbox"/> Strength	5,000+
<input type="checkbox"/> Learning	2,500+
<input type="checkbox"/> Courage	1,000+
<input type="checkbox"/> Wonder	500+
<input type="checkbox"/> Confidence	up to 499

☐ I/We will give securities. Please send me information. ☐ My gift will be matched by _____

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DONOR INFORMATION

NAME(S)

ADDRESS

CITY

STATE

ZIP

()

HOME PHONE

EMAIL

Please list my/our name(s) as _____

☐ I/We have remembered TCWS in my/our estate planning. ☐ I/We wish my/our gift to be anonymous.

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AFFILIATION WITH THREE CEDARS WALDORF SCHOOL

☐ Current Parent of _____

☐ Parent of Alumni _____

☐ Grandparent of _____

☐ Alum: Class of _____

☐ Faculty/Staff ☐ Trustee/Former Trustee ☐ Former Faculty/Staff ☐ Friend of Three Cedars Waldorf School

Thank you for being a part of our community!

TCWS
COMMUNITY
FUND | **WHY DO
YOU LOVE
THREE CEDARS?**

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development@threecedarswaldorf.org