| Annual Fund Gift             |  | WAARE (C)  |
|------------------------------|--|--|
| Allitual Fulla Gift          | □ Visionaries \$5  | 00+ NAME(S)  |
| My gift or pledge to         | ☐ Stewards \$2   | OO+ ADDRESS  |
| the Annual Fund is:          | The second secon | 00+  |
| \$                           | ☐ Community Circle up to \$  | OO CITY STATE ZIP  |
| ☐ Check enclosed – payabl    | e to Three Cedars Waldorf School   | PHONE  |
| ☐ Please charge my/our: [    | □ Visa □ Mastercard  | EMAIL  |
| ACCOUNT NUMBER               | EXP DATE   | Please list my/our name(s) as  |
|                              |  | ☐ I/We have remembered TCWS in my/our estate planning.   |
| AUTHORIZED SIGNATURE         |  | □ I/We wish my gift to be anonymous.   |
| Pledge payments: □1 □        | 2 or □4 from to  | Three Cedars Waldorf School is a 501(c)(3) charitable organization registered with Washington's  |
| ☐ I/We will give securities. | Please send me information.  | Secretary of State. Contributions to the Three Cedars Waldorf School are tax-deductible to the extent  |
| ☐ My gift will be matched    | by   | allowed by law. The school's fiscal year begins on August 1 and ends on July 31 each year. Gifts are credited to the fiscal year in which they are received. Tax ID# 91-1694599. |
| Affiliation With Thi         | ree Cedars Waldorf Schoo   | Alums: Help Us Stay in Touch!  |
| ☐ Current Parent of          |  | NAME   |
| Deletion of Alexani          |  |  |
| ☐ Relative of Alumni         |  | EMAIL  |
| ☐ Alum: Class of             |  | ( )<br>PHONE   |
| ☐ Faculty/Staff              | ☐ Trustee/Former Trustee   |  |
| ☐ Former Faculty/Staff       | ☐ Friend of Three Cedars   | Tell us what you've been up to:  |
| □ Relative of                |  |  |
|                              |  |  |
|                              |  |  |

Email updates to annualfund@threecedarswaldorf.org



425.401.9874

556 – 124th Ave NE, Bellevue, WA 98005 annualfund@threecedarswaldorf.org www.threecedarswaldorf.org