

ANNA MARIE'S ALLIANCE

2015

I/We would like to join **Anna Marie's Leadership Gift Society**

- Safe Communities Provider:** \$10,000 per year for 5 years (\$833/month)
- Hope Provider:** \$5,000 per year for 5 years (\$416/month)
- Safe Shelter Provider:** \$1,000 per year for 5 years (\$83/month)
- Charge my credit card – fill out the credit card form below

I/We would like to join the monthly **Peacekeeper's Club**

- Peacekeeper** Greater than \$75/month = \$ ____/month
- Advocate** \$55 - \$75/month = \$ ____/month
- Change Agent** \$30 - \$50/month = \$ ____/month
- Friend of Anna Marie's** \$10 - \$25/month = \$ ____/month
- Charge my credit card – complete credit card information below
- Debit my checking account – complete electronic fund transfer information below

Payment Options:

- Credit Card:** ___ Visa ___ Mastercard ___ Discover ___ American Express
Name on Card (print): _____ Exp Date: _____
Account /Card# _____ Signature: _____
- Electronic Fund Transfer:** I authorize Anna Marie's Alliance to withdraw indicated funds from my bank account on the 15th of each month. I have attached a voided check.
- Pledge reminder:** I commit to \$____ payable by June 30 of each year, reminder will be ___ annually ___ quarterly ___ monthly
- One time gift:** ___ \$1000 ___ \$750 ___ \$500 ___ \$250 ___ other
- Matching gifts:** My matching gift company: _____

Contact Information:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Day Phone: (____) _____ Evening Phone: (____) _____
Email Address: _____