



Pledge Form

Friends of the Historic Richboro School Striving to Preserve History and Education for Future Generations

Donor Information (please print or type)

Name
Billing address
City
State
ZIP Code
Telephone (home)
Telephone (business)
Fax
E-Mail

Pledge Information

I (we) pledge a total of \$_____ to be paid: ___ now ___ monthly ___ quarterly ___ yearly.

I (we) plan to make this contribution in the form of: ___ cash ___ check ___ other.

Gift will be matched by _____ (company/family/foundation).
___ form enclosed ___ form will be forwarded

Acknowledgement Information

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

___ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

Friends of Historic Richboro School
P.O. Box 59
Richboro, PA 18954

Your gift is totally tax deductible to the extent currently allowed by IRS regulations
45-0581598