



Component Sponsorship Form

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

E Mail \_\_\_\_\_

Component to be sponsored \_\_\_\_\_

Paying in full today or making a pledge? \_\_\_\_\_

Sponsor Recognition

Please provide name exactly as you wish to have it displayed for recognition:

\_\_\_\_\_

\_\_\_\_\_  
Donor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Donor Name (print)

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Committee Member Name

Type of Pledge

I/we plan to make our contribution in the form of:

Cash  Check  Credit  Stock

*(For stock transfers, please contact Stacey Muller at the Community Foundation of Orange and Sullivan at 845-769-9393 or stacey@cfosny.org)*

Total amount pledged \_\_\_\_\_

\_\_\_\_\_ Equal Payments\* of \$\_\_\_\_\_ to be made:  Monthly  Quarterly

Please pay full pledge amount by February 1, 2019

Preferred method of payment \_\_\_\_\_

My gift will be matched by \_\_\_\_\_

\*Please make checks out to: CFOS Warwick Playground Dreams - P.O. Box 1226 Greenwood Lake, NY 10925