



ANNUAL FUND Pledge Card

	Please print your name as you wish to appear in The Annual Fund I	Report.	(please print clear
	Name:		
	Address:		
	City:	, State:	Zip:
	Phone:		
	Email:		
	Present Occupation:		
	Present Employer:		
	Name of Spouse:		
	Class notes for the John Paul II School Newsletter:		

I would like to invest in the future of John Paul II Regional School. **JOHN PAUL II** ☐ Enclosed is a tax-deductible gift of \$ to the John Paul II Annual Fund. ANNUAL FUND Pledge ☐ I / We pledge a gift of \$_____, Enclosed is \$_____ with a balance to be fulfilled by June 30th. ☐ \$500 and above - John Paul II Benefactor Society ☐ \$250 to \$499 - **Principal's Circle** Please check as appropriate: □ \$100 to \$249 - Friends of Our Lady of Grace, St. Luke, and St. Lawrence ☐ Current Parent □ \$50 to \$99 - Friends of Catholic Education ☐ Alumnus / Alumna: Class Year:_____ ☐ Up to \$49 - **Hawk's Club** □ Alumni Parent: ☐ I wish my contribution to remain anonymous. Student Name: ☐ The company matching gift form is enclosed. ☐ Grandparents: ☐ This gift is made… "in memory " or "in honor " of: _____ Student Name: NOW ☐ Check or Money Order ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover □ Friend **ACCEPTING** Name on card: ☐ Faculty/Staff Credit Card No. □ Board Member Expiration Date: CID

Please make your check payable to: "John Paul II Regional School" and return your contribution in the envelope provided.