



CAPITAL CAMPAIGN PLEDGE FORM

PLEASE MAIL OR SCAN/EMAIL THIS FORM TO KDF ADDRESS BELOW

*I/We wish to make a gift to the Capital Campaign to benefit Kids Discovery Factory (KDF).
I/We commit to the following:*

Total Amount of Gift: \$ _____

Initial Payment: \$ _____

Balance: \$ _____

Payable: One-time or Over 1 Year 2 Years 3 Years 4 Years 5 Years **Beginning Date:** ____/____/____

Payment Schedule: Monthly Quarterly Semi-Annually Annually

Signature: _____ **Date:** ____/____/____

Personal Gift or Corporate Gift (please check one)

Company/Organization (if appropriate):* _____

Name(s):* _____ Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Alt. Telephone: _____

Credit Card (visa, master card, amex - please circle one):

CC#: _____ Exp date ____/____/____ CSV#: _____

Signature: _____ **Email:** _____

Please PRINT NAME: _____ Date: ____/____/____

For Donor Recognition, I understand my name/company name will be listed as I have written above.*
(Note: If appropriate, based on donation amount, area/exhibit sponsorship details and recognition will be addressed and agreed upon in a separate Sponsorship Rights Agreement.)

I/We wish to remain Anonymous.

My gift is in Honor/Memory of: _____

Please make checks payable to: Kids Discovery Factory (KDF), PO Box 62, Batesville, IN 47006

Questions about your pledge? Interested in making an estate or stock gift?

Contact Amber McGuire at 812-932-5437 or amber@KidsDiscoveryFactory.org

For office use only:

KDF Contact _____

Request Entered (date) ____/____/____ Staff Initials _____