



Capital Campaign for The Center for Safe Futures Pledge Form

Name _____ Phone _____
Address _____
City _____ State _____ Zip Code _____

Gift Information:

I (we) intend to contribute \$_____ to Safe Futures, restricted to The Capital Campaign for The Center for Safe Futures. The gift will be paid as follows:

- Single payment
- Multiple payments – I will pay the pledge over _____ (number of years) as follows:
 ___ Monthly ___ Quarterly ___ Semi-Annually ___ Annually
- Payment beginning: _____ (month/year)
- Gift will be matched by (company/family/foundation):

Payment Information:

- My check is enclosed payable to: **Safe Futures**

Contact me for:

- ACH Banking information.
- I wish to donate stock/appreciated assets.
- The gift may be made from a Donor Advised Fund, Family Trust, or some other entity.

Gift Recognition:

- Please publicly recognize this gift from (name/names):
 _____.
- I am interested in permanent recognition opportunities within the facility.
- This gift is in my honor / in memory of: _____.
- Please do not recognize this gift publicly. I (we) wish to remain anonymous.

Signature(s): _____ Date: _____
 _____ Date: _____

Please return your completed pledge form to:
 Katherine Verano, Chief Executive Officer of Safe Futures
 16 Jay Street, New London, CT 06320
 kverano@safefuturesct.org

Thank you for investing in the future of our community!

Safe Futures is a 501(c)(3) non-profit organization – Tax ID 06-0950718. Gifts are tax deductible as allowed by the law. This pledge is not legally binding and may be altered by the donor at any time.