



**Sacred Heart
PLEDGE FORM**

Thank you for your support of **Sacred Heart** (4 6 8) Renew + Rebuild capital campaign. Please use this form to confirm your unrestricted pledge.

Pledge Amount: \$ _____ **Date:** _____

I am making an initial payment of \$ _____. I would like to make payments in installments of \$ _____ over the next _____ years beginning on _____ (date) on the following basis:

- Annually
- Semi-annually
- Quarterly
- Monthly.

Please make checks payable to **Renew + Rebuild**.
All gifts are processed through the New York Catholic Foundation.

Selection of Automatic Payments Methods – Select One

Authorization for direct debit (ACH) payments: I/we authorize the Renew + Rebuild campaign office to initiate debit entries into my/our Checking account Savings account (select one) at the depository financial institution named below, and to debit the same such amount. I/we acknowledge that the origination of ACH transactions to my/our account must comply with provisions of U.S. law. **For ACH payments, please attach a copy of a voided check to your pledge form.**

Depository Name: _____ Routing #: _____
 Address/Branch: _____ Account #: _____
 Please deduct \$ _____ from this account on 1st or 15th of
 each month for _____ months.

*** OR ***

Authorization for credit card and debit card payments:

- Visa
- MasterCard
- Discover
- American Express

Name as it appears on account: _____
 Credit Card #: _____ Exp. Date: _____

Name: _____ **Spouse:** _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
Phone: _____ **Other Phone:** _____
E-Mail: _____
Signature: _____ **Date:** _____

*Please complete and return this form to Robin Kneblick at Robin.Kneblick@archny.org or
Renew + Rebuild Campaign Office, 1011 First Avenue, 14th Floor, New York, NY 10022*