



United Way Fox Cities  
1455 Midway Road  
Menasha, WI 54952  
920-954-7210

# PLEDGE FORM

Scan QR code to learn more on how to get involved in your community.



UnitedWayFoxCities.org

## 1 Your Information

First Name \_\_\_\_\_ Middle Initial \_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

I/We prefer to be anonymous. Work E-mail \_\_\_\_\_ Personal E-mail \_\_\_\_\_

Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
**(for sweepstakes, LINC, and Emerging Leaders eligibility)**

**Preferred Method of Contact**  Work E-mail  Personal E-mail  Preferred Phone  
*By checking a box above, you consent to be contacted via that method. If you wish to opt out or change your preferred method of contact at any time, you can do so by contacting [andar@unitedwayfoxcities.org](mailto:andar@unitedwayfoxcities.org). By opting out, you acknowledge that you may not receive communication via your preferred method but may still be contacted through alternative means.*

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Preferred Phone \_\_\_\_\_  Cell  Home Work Phone \_\_\_\_\_ Ext. \_\_\_\_\_

Employer Name \_\_\_\_\_  New employer in the last year  Retiring within one year

**All information is kept confidential and is used only by United Way Fox Cities. We do not sell or share our list of contributors with other organizations.**  
We do not provide goods or services in whole or for partial consideration for any contribution made to the organization via this pledge form.  
Read our complete privacy and designation policies online at [UnitedWayFoxCities.org](http://UnitedWayFoxCities.org).

## 2 Your Gift Payment Options

### PAYROLL DEDUCTION

▶ **Number of pay periods** \_\_\_\_\_

I want to contribute the following amount **per pay period**:  
 \$100  \$75  \$50  \$25  \$10  Other \$ \_\_\_\_\_

Make my **total** deductions equal: \$ \_\_\_\_\_  
*(United Way will do the math to determine amount/period.)*  
 One-time deduction of \$ \_\_\_\_\_ *(if company allows)*  
 One hour's pay per month \$ \_\_\_\_\_ *(hourly rate)*

### **DIRECT GIFT** *(Cash, Check, and Credit Card Options)*

**Cash**  
Amount \$ \_\_\_\_\_

**Credit Card** Amount \$ \_\_\_\_\_  
*Your credit card may be processed after your requested date. To ensure your credit card contribution is processed before year end, please make a gift online: [www.UnitedWayFoxCities.org/Give](http://www.UnitedWayFoxCities.org/Give).*

Visa  Discover  MasterCard  American Express  
Account #:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

▶ **Expiration date:** \_\_\_\_\_ **Security Code:** \_\_\_\_\_  
 **One-time gift** to be charged on \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 **Recurring Monthly** *(1st of the month starting January)*  
 **Recurring Quarterly** *(1st of January, April, July, and October)*

**BILL ME** Amount \$ \_\_\_\_\_  
**(\$50 Minimum)**

**One-time gift** to be billed on \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 **Recurring Quarterly**  
*(1st of January, April, July, and October)*

**Stocks, securities, or automated bill payer**  
Please contact United Way Fox Cities at 920-954-7210 to complete these payment options.

**Optional Designation:** Please direct the following amount(s) from my total gift to the organization(s) listed below.  
*Note: Any funds not allocated to a specific organization will default to United Way Fox Cities.*

Agency Named Below \$ \_\_\_\_\_ (\$50 min.)  
 Other United Way Named Below \$ \_\_\_\_\_ (\$50 min.)  
Agency/Other United Way Name Mailing Address, City, State, Zip Code:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**My gift can be combined with my spouse's / partner's gift to United Way Fox Cities.**  
Spouse/Partner Name: \_\_\_\_\_  
Spouse/Partner Company: \_\_\_\_\_

I/We prefer to be anonymous. Do not release my/our name(s) to the designated agency(ies).

**MY TOTAL GIFT**  
\$ \_\_\_\_\_  
Amount

# THANK YOU!

Your gift to United Way Fox Cities makes a difference in the lives of **1 in 3 people** in our community.

**Sign:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PLEASE MAKE A COPY FOR YOUR RECORDS.**