

Chai Match 3

Phase 2 Donor Information Form

After the camp submits this form with information about an eligible pledge, the first payment of at least 1/3 of the pledged amount must be received within 60 days. The balance must be paid by 3/18/2018

1. CAMP INFORMATION

Name of Camp: _____

Camp Chai Match 3 Contact: _____ Email: _____

Camp Address: _____

Contact Telephone: () _____

2. DONOR INFORMATION

Donor Name: _____

Additional Donors: _____ (if other family members are gifting jointly)

Name for Envelope: _____ Salutation: _____

Donor Address: _____

Donor Telephone: _____ Email: _____

3. DONOR RECOGNITION

Permission granted to send a personal acknowledgment to the donor from Harold Grinspoon.

4. PLEDGE INFORMATION

Pledge Amount: \$ _____ Date of Pledge: _____

-Date of first payment (1/3 must be paid within 60 days): _____

-Pledge Payment Schedule (after first payment): _____

NOTE: Full payment must be made no later than March 18, 2018.

5. PLEDGE DESIGNATION

Specify the needs toward which this gift is directed. _____

Attach either a copy of pledge card/letter (written terms of pledge) signed by the donor or proof of payment in full.

(FOR HGF USE ONLY):

Date Received: _____ Received by: _____

Submit the completed form by one of the following methods:

Mail:

JCamp180

Attn: Jocelyn Wildman

67 Hunt Street Suite 100

Agawam, MA 10001

E-mail: Jocelyn@hgf.org

Fax: (413) 276-0806

