



Keystone
Science
School



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KeystoneScienceSchool.org



Campaign Pledge Form *(please print)*

Name of Donor(s) _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Pledge Amount

Capital Campaign, total amount \$ _____

Annual Support: \$ _____

Payment Schedule

Payments may be made over time and ideally within a three year period, acknowledging the need to be flexible to ensure your needs are met. Keystone Science School will provide a pledge reminder for each of these payments prior to the agreed-upon payment date. We also welcome a commitment to the Annual Fund over the period of your campaign pledge in order to support the ongoing work of Keystone Science School.

Payment Date(s)	Capital Campaign	Annual Support
20_____	\$ _____	\$ _____
20_____	\$ _____	\$ _____
20_____	\$ _____	\$ _____

I would like to make my contribution over _____ years to be completed in _____.

Payment Details

- My check is enclosed. *(Please make check payable to Keystone Science School.)*
- Transfer of Stock. *(Refer to Ways to Give summary or we will contact you.)*
- Matching Gift. *(We will contact you for details.)*
- Please charge my credit card. *(Refer to Ways to Give summary or we will contact you.)*

Acknowledgement

Please print your name as you wish it to be acknowledged in our printed and electronic donor lists.

Check this box if you wish to remain anonymous.

Thank you so much for your leadership and generosity.

Donor Signature(s) _____ Date _____

_____ Date _____

For your records, our tax ID# is: 46-1735364