



THE SUMMIT SCHOOL

*Serving bright students with dyslexia
and other learning differences*

The Campaign for Summit Pledge Form / Letter of Intent

Name(s):					
Address:					
City:		State:		Zip:	
Phone:			E-mail:		

PLEDGE DETAILS

I/ We wish to support The Campaign for Summit with a total capital commitment of \$ _____.
A down payment of \$_____ is included.

<i>School Year</i>	2023-2024	2024 - 2025	2025 - 2026	2026 - 2027	2027 - 2028
Capital Gift Amount Per Year					

Please print your name(s) below as you prefer to be recognized for publication or naming purposes:

Please write "Anonymous" if you do not wish to be included in any announcements or donor listings.

Please indicate what Campaign Naming Recognition Opportunity you are interested in:

Printed Name: _____

Signature: _____ Date: _____

PAYMENT OPTIONS (select one) CHECK INCLUDED WITH PLEDGE: YES NO

Check Payments beginning (mm/yy) _____ Annually Semi-Annually

Stock transfer, planned giving, or matching gift (The Campaign Office will contact you.)

Credit/ Debit Payments beginning (mm/yy) _____ Annually Semi-Annually

Name on Card _____

Credit Card Number _____

Exp. Date _____ CSV Code _____ (Circle one): Visa Discover Master Card

Thank you for your commitment to The Summit School. Payments are tax deductible to the extent allowed by law. Pledge reminders will be sent annually unless otherwise specified. Please mail completed pledge form to:

The Summit School, 664 East Central Avenue, Edgewater, MD 21037