

# ALLEY THEATRE

I (we) hereby pledge and agree to pay the Alley Theatre, in support of its operations,  
the sum of \$ \_\_\_\_\_ payable over \_\_\_\_\_ years.

*Note: Gifts may be pledged over multiple years and made in the form of cash, credit card and/or securities*

Total pledge \$ \_\_\_\_\_

Paid herewith \$ \_\_\_\_\_

## BALANCE TO BE PAID AS FOLLOWS

MONTH	YEAR	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I would like to receive pledge reminders:

- ☐ Annually  
☐ Quarterly  
☐ Other

- ☐ I wish to recommend a gift through a donor advised fund. I personally guarantee that this pledge will be fulfilled in order for the Alley Theatre to book this pledge.

### For purposes of donor recognition:

- ☐ I (we) would like our pledge to be treated as an anonymous commitment; or  
☐ Please list my (our) name as specified below in all appropriate donor recognition:

*(Please print clearly as you would like to be recognized. For example: Mary K. and John H. Jones, The Family of John Jones, In memory (or honor) of Mary Jones.)*

Name (Print) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Office Phone \_\_\_\_\_

Email \_\_\_\_\_

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

*Checks to be made payable to Alley Theatre*