

Alumni and Friends of Belmont High School, Inc.
Charitable Giving Pledge

In support of the Alumni and Friends of Belmont High School, Inc. (AFBHS), I/we pledge and promise to pay the total sum of \$_____ to be paid as follows:

\$_____ on _____

\$_____ on _____

\$_____ on _____

\$_____ on _____

\$_____ on _____

___ This is an unrestricted pledge, and the donations may be used for any purpose within the corporate mission of AFBHS

___ This pledge is made () in honor of or () in memory of _____

___ This pledge is designated for an existing endowment fund: _____

Signed: _____ Date: _____

_____ Date: _____

Printed name(s): _____
(as you wish it to appear in donor recognition materials)

___ I prefer to remain anonymous

Address: _____ Telephone: _____

_____ If a BHS alum, class year: _____

Email: _____

Please return this pledge form to: **AFBHS, PO Box 40, Belmont, MA 02478**

Thank you for your commitment to AFBHS!

No goods or services will be provided in return for your gift; your contributions are tax deductible to the full extent of the law.