



Pledge Form

ADULT & CHILDREN ENTERPRISES

"To create a culture of entrepreneurs and entrepreneurial thinkers, to improve socio-economic conditions for youth and families placed at-risk, in order to support and sustain diverse family systems."

Donor Information (please print or type)

Name	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

Pledge Information

I (we) pledge a total of \$_____ to be paid:
___ now ___ monthly ___ quarterly ___ yearly.

I (we) plan to make this contribution in the form of:
___ cash ___ check ___ credit card ___ other.

Credit card type	
Credit card number	
Expiration date	
Authorized signature	

Gift will be matched by _____ (company/family/foundation).
___ form enclosed ___ form will be forwarded

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

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___ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

ADULT & CHILDREN ENTERPRISES, INC
900 SOUTH WILMINGTON STREET
RALEIGH, NC 27601

We are a 501 C (3) organization with tax exempt status.