



Alina Lodge

Operated by Little Hill Foundation

Pledge Form

On this date of _____ I/we do hereby pledge a total amount of \$ _____ to Little Hill Foundation for the Rehabilitation of Alcoholics for the purpose of _____

This gift is in Memory ___; Honor ___: of _____.

This contribution is to be: Paid in full ___ on/before _____.

Pledged over a ___ year period _____.

Please provide me/us with a pledge reminder on or before _____ of each year.

Check Enclosed ; Please charge \$ _____ to my: Visa ; MasterCard ; AMEX ;

No. _____; Exp. Date ___/___; Name as it appears on Card _____

Verification Number * _____

* Visa/MasterCard = 3 digit number on back of card following the account #.
American Express = 4 digit number on front of card above account #.

Printed Donor Name

Printed Donor Name

Donor Signature

Donor Signature

Address

City

State

Zip

Phone - Day _____; Evening _____; E-Mail _____

___ This contribution is Anonymous

___ I will contact my company about a matching gift.

Please call me, I would like to: ___ discuss an income-producing gift.

___ mention Alina Lodge and/or Haley House in my will.

___ introduce you to someone who can help.

Little Hill Foundation for the Rehabilitation of Alcoholics, Inc. is qualified by the IRS as a 501(c)(3) not-for-profit charity to receive contributions that are deductible for federal income tax purposes. This charitable organization is registered with the Attorney General of the State of New Jersey. Information may be obtained by calling 973-504-6215. Registration does not imply endorsement.

Little Hill Foundation for the Rehabilitation of Alcoholics, Inc., Box G, Blairstown, NJ 07825