UNITED WAY OF CENTRAL ALABAMA
EDUCATION PLEDGE FORM

United Way
of Central Alabama, Inc.

1. Donor Information *(Please Print)*

Name: _____ School System: _____

Employee ID: _____ School Name: _____

Email: _____ Phone: _____

United Way of Central Alabama believes that giving is a personal decision. Your gift of any amount is important and appreciated.

2. Pledge

Easy Payroll Deduction

Per Pay Period: ☐ $25 ☐ $10 ☐ $5 ☐ Other: _____

I am paid: ☐ Every two weeks ☐ Monthly

☐ Cash Attached ☐ Check Attached _____ Check# _____

☐ How would you like to pay your pledge:

☐ Payroll Deduction: $_____ x _____
Amount per pay period Pay periods / year

☐ By Debit/Credit Card _____ _____ ☐ Visa ☐ Master Card ☐ Discover ☐ American Express
Account Number Exp. Date

☐ Bill Me ($100 minimum total pledge)

My Total Annual Gift $ _____

3. Signatue:

_____ _____
Signature *(required)* Date

CHECK IF YOU HAVE:

☐ Included United Way in your will

☐ Given to United Way for 25 years or more

☐ Retired or plan to retire within the next 12 months

☐ Sign up for United Way of Central Alabama's enewsletter to stay up to date on how your contribution is used to improve lives and our community.

Thank you for your support!

In accordance with IRS requirements, please keep a copy of your pledge card for your tax records. United Way of Central Alabama has not provided any goods or services inconsideration, in whole or in part, for this contribution.

uwca.org