



Matching Gift Challenge Donation/Pledge Form

WE WILL! Build in Faith Capital Campaign – Matching Gift Challenge Donation/Pledge Agreement

Join us in accomplishing our mission to *Build in Faith* so we can provide greater opportunity for God to use St. Mark's in service to our students, congregation and the community. I/We, _____, the undersigned, enter into this CAPITAL CAMPAIGN AGREEMENT this ____ day of _____, 20__ with ST. MARK'S CHURCH AND SCHOOL, a Florida not-for-profit corporation. I/We pledge the sum of \$_____ toward the Capital Campaign Matching Gift Challenge. **In consideration, St. Mark's will gratefully acknowledge the gift in the following manner (please list name as you would like it to appear on Donor Wall):**

I/We do not desire any public recognition for our gift. Please list the gift as "Anonymous" in all publications.

Donor(s) Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email: _____ Alt Phone: (____) _____

Please check all affiliations that apply:

- | | |
|--|---|
| <input type="checkbox"/> Church Member | <input type="checkbox"/> Church/School Staff |
| <input type="checkbox"/> School Parent(s) | <input type="checkbox"/> Friend of Church/School |
| <input type="checkbox"/> School Grandparent(s) | <input type="checkbox"/> Service Provider |
| <input type="checkbox"/> Alumni Parent(s) | <input type="checkbox"/> Other – please specify _____ |
| <input type="checkbox"/> Alumni Grandparent(s) | |

My Pledge/Donation:

Total Pledge: \$ _____

Paid Herewith: \$ _____

Balance payable as follows: (please specify amounts and dates if you would like to pay in installments)

	<u>Payment Date</u>	<u>Pledge Portion</u>
Year 1:	_____	\$ _____
Year 2:	_____	\$ _____
Year 3:	_____	\$ _____
Year 4:	_____	\$ _____
Year 5:	_____	\$ _____

Payment Method Options:

I would like to pay by check: _____ (check number)

I would like to pay by ACH Direct Debit from Checking
(Additional form required to process ACH Debit)

I would like to pay by (circle one): **VISA** or **MasterCard**

Card Number: _____

Expiration Date: _____ Security Code: _____

Card Holder's Name: _____

- Please charge my card once for the full amount of my pledge
- Please charge me according to the schedule specified to the left
- I would like an automatic donation of \$_____ to be deducted from my credit card monthly (____), quarterly (____), semi-annually (____) or annually (____) through the duration of pledge period, beginning _____ (month), _____ (year).

Please make contributions payable to: St. Mark's Church and School. **Mail to:** St. Mark's Church & School, **Attention: Development Office**, 3395 Burns Road, Palm Beach Gardens, FL 33410.

I understand that St. Mark's is relying upon the timely payment of this pledge to meet the financial obligations of the project. I understand that this Agreement shall be interpreted under the laws of the State of Florida and that this pledged obligation is legally binding on me and my estate.

Entered into as of the date set forth above.

St. Mark's Church and School

Donor Signature(s)

By: _____
Authorized Signature

Donor Signature(s)

Position

Date: _____

Date: _____

ST.MARK'S CHURCH AND SCHOOL IS A 501(c) (3) NON-PROFIT CORPORATION AND ALL GIFTS TO THE ORGANIZATION ARE DEDUCTIBLE ON CORPORATE, FOUNDATION AND INDIVIDUAL TAX RETURNS TO THE EXTENT PROVIDED BY STATE AND FEDERAL LAWS. A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL FREE 1-800-435-7352. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

Pledge Amount	Duration	Pledge Breakdown	Your Total Gift When Matched
\$500	2-year pledge	Less than \$0.70 per day	\$1,000
\$1,000	2-year pledge	Less than \$1.50 per day	\$2,000
\$5,000	5-year pledge	Less than \$85 per month	\$10,000
\$10,000	5-year pledge	Less than \$170 per month	\$20,000
\$20,000	5-year pledge	Less than \$335 per month	\$40,000

Naming Opportunities are available.

TO BE COMPLETED BY DONOR AND ST. MARK'S CHURCH & SCHOOL

Naming Opportunities

In recognition for your gift, St. Mark's Church and School will provide the opportunity to name:

Area: _____

Location on Campus: _____

for the life of the building at St. Mark's Church and School located at 3395 Burns Road, Palm Beach Gardens, FL 33410.

In recognition of your gift, St. Mark's Church and School will provide the following signage in the aforementioned Area:

Primary Signage Type: _____

Verbiage on Primary Signage:

Additional Signage Type (where appropriate):

Verbiage on Additional Signage:

Verbiage for Donor Wall: _____

If the Gift is not fully funded within the time frame stipulated in this agreement, the name may be removed from the Area and the funds may be categorized in a different class in accordance the Church and School's Gift Acceptance Policy. The parties agree that this naming is contingent on and subject to prior approval by the Vestry of St. Mark's Church and the School Advisory Board of St. Mark's School. If, in the opinion of the Vestry and School Advisory Board in their sole discretion that all or part of the fund cannot be applied usefully for the designated purpose due to non-renewal, termination, or dissolution of sponsored area, asset or program to which it attached, then the Vestry and School Advisory Board may apply the Fund for any related purpose which will most nearly accomplish the wishes of the Donor expressed herein.

IN WITNESS WHEREOF,
the parties have executed this agreement this ____ day of _____ 20____.

Witnesses:

_____ By: _____
Donor

_____ By: _____
NAME
Chairman, We Will Build in Faith Campaign

Naming Opportunities are available.